NEIGHBOURHOOD PROFILES:
BEASLEY, CATCH (COMMUNITY ACCESS TO CHILD HEALTH), CROWN POINT, JAMESVILLE, KEITH, MCQUESTEN, RIVERDALE, ROLSTON, SOUTH SHERMAN (STADIUM DISTRICT), STINSON AND WEVER.

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Prepared for:
United Way of Burlington and Greater Hamilton

United Way
Burlington & Greater Hamilton

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SPRC
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ACKNOWLEDGEMENTS

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We would also like to acknowledge members of the Community Data Consortium in Hamilton, especially the City of Hamilton, for their support in making in-depth census data available locally.

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1.0 INTRODUCTION

1.1 Influence of neighbourhood-based agencies in improving quality of life

In 2010, the Hamilton Spectator's Code Red series highlighted some of the inequities among our city's neighbourhoods and their impacts on residents' health. The Chief Public Health Officer of Canada explains the links clearly:

> "People with better incomes, better education and better social supports enjoy better health than those with fewer social and economic opportunities."[1]

It is specifically in the areas of better education and better social supports that United Way agencies and other Hamilton social service agencies already have important impacts. Neighbourhood-based service delivery as a strategy is well positioned to deal with the some of the challenges illustrated by Code Red. For example:

- The United Way of Toronto's Strong Neighbourhood Task Force's research demonstrated that "Neighbourhood social services are cost-effective and critical to improving outcomes"[2].
- The City of Hamilton's framework for human services planning (*The Playbook*) lists Supporting Neighbourhood Capacity Building as its first principle. *The Playbook* also recommends developing leadership capacity in neighbourhoods to ensure equitable participation by residents in all parts of Hamilton. "We know that by eliminating silos, taking a more coordinated approach to service delivery and community development, and integrating grassroots input from community partners and citizens we will unleash innovative ideas, help create vibrant, healthy neighbourhoods and improve the overall quality of life for the people of Hamilton."[3]
- The Caledon Institute of Social Policy points to the United Way's unique role in neighbourhood development: "Given its local and national profile, and its relationships with the private, voluntary and public sectors, the United Way movement [is] ideally positioned to convene partners around the goal of building strong, healthy communities."[4]

The United Way of Burlington and Greater Hamilton has been a leader in Hamilton with its Strengthening Neighbourhoods focus over many years. With a recent update of their strategic directions, all United Way priority areas now include agencies with a neighbourhood focus. The new "Healthy People, Strong Communities" priority area itself received over $2 million in investment from Hamilton donors to the United Way in 2010.

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[1] Public Health Agency of Canada. 2008. *The Chief Public Health Officer's Report on The State of Public Health in Canada 2008.* http://www.phac-aspc.gc.ca/cphorsphc-respcacsp/2008/cpho-aspc01-eng.php

[2] United Way Toronto. 2005. *Strong Neighbourhoods -A Call to Action: A report of the Strong Neighbourhoods Task Force.* http://www.unitedwaytoronto.com/downloads/whatWeDo/reports/SNTF-web_report.pdf

[3] City of Hamilton. 2010. *The Playbook - A Framework for Human Services Planning in Hamilton.* http://hamilton.ca/HealthandSocialServices/SocialServices/humanservicesplan

[4] Leviten-Reid, E. 2006. *Asset-based, Resident-led Neighbourhood Development.* Caledon Institute of Social Policy. http://www.caledoninst.org/Publications/PDF/599ENG.pdf

1.2 Development of this neighbourhood profile report

The United Way commissioned the SPRC to complete a set of demographic profiles of some of Hamilton's neighbourhoods, as to aid the United Way and its agencies and stakeholders to better understand the neighbourhoods they are serving. We anticipate that an additional use of these profiles will be to help residents and agencies bolster the arguments they make to funders and donors about the realities of their communities and leverage additional investments for community-based responses.

The United Way convened a Reference Committee that gave input into the selection of neighbourhoods and the development of the profiles. The members of the Reference Committee included: Riley Crotta and Katrice Edgar, City of Hamilton Public Health Unit; Sharon Charters, Hamilton Community Foundation; Mike Desjardins, Hamilton Wentworth District School Board; Edward Bradica, Hamilton Wentworth Catholic District School Board; Peter Kitchen and Ruta Valaitis, McMaster University; David Derbyshire, Wesley Urban Ministries.

A more comprehensive profile was initially completed for the McQuesten neighbourhood, with some input from members of the McQuesten Planning Team. The longer McQuesten profile is being published as an adjunct to this report and will be available on the SPRC website. However, due to the resources available, it was decided to proceed only with shorter profiles for the remaining neighbourhoods.

Included in this report are the eight neighbourhoods that have been funded through the Hamilton Community Foundation's Tackling Poverty Together fund: CATCH, Crown Point, Jamesville, Keith, McQuesten, Riverdale, South Sherman, and Wever. Collectively, these areas have become known as Hamilton's "Neighbourhood Hubs". The development of these hubs has been fairly grassroots-driven as residents had to self-identify their neighbourhoods and apply for funding to do additional community development. This means that among the Hubs' strengths are that there is some local leadership, action plans and services in place. This process however has excluded some of Hamilton's neighbourhoods which may have just as many social and economic challenges but don't yet have local leadership to apply for grants and develop partnerships.

In addition to the eight established Hubs, the United Way wanted to use this profile document as an opportunity to highlight a neighbourhood on the Mountain that has higher than average poverty rates, but has not been designated as a "Hub". An analysis of census data showed that the neighbourhood of Rolston has the highest rate of poverty on the mountain. This neighbourhood was selected and added to this set of neighbourhood profiles.

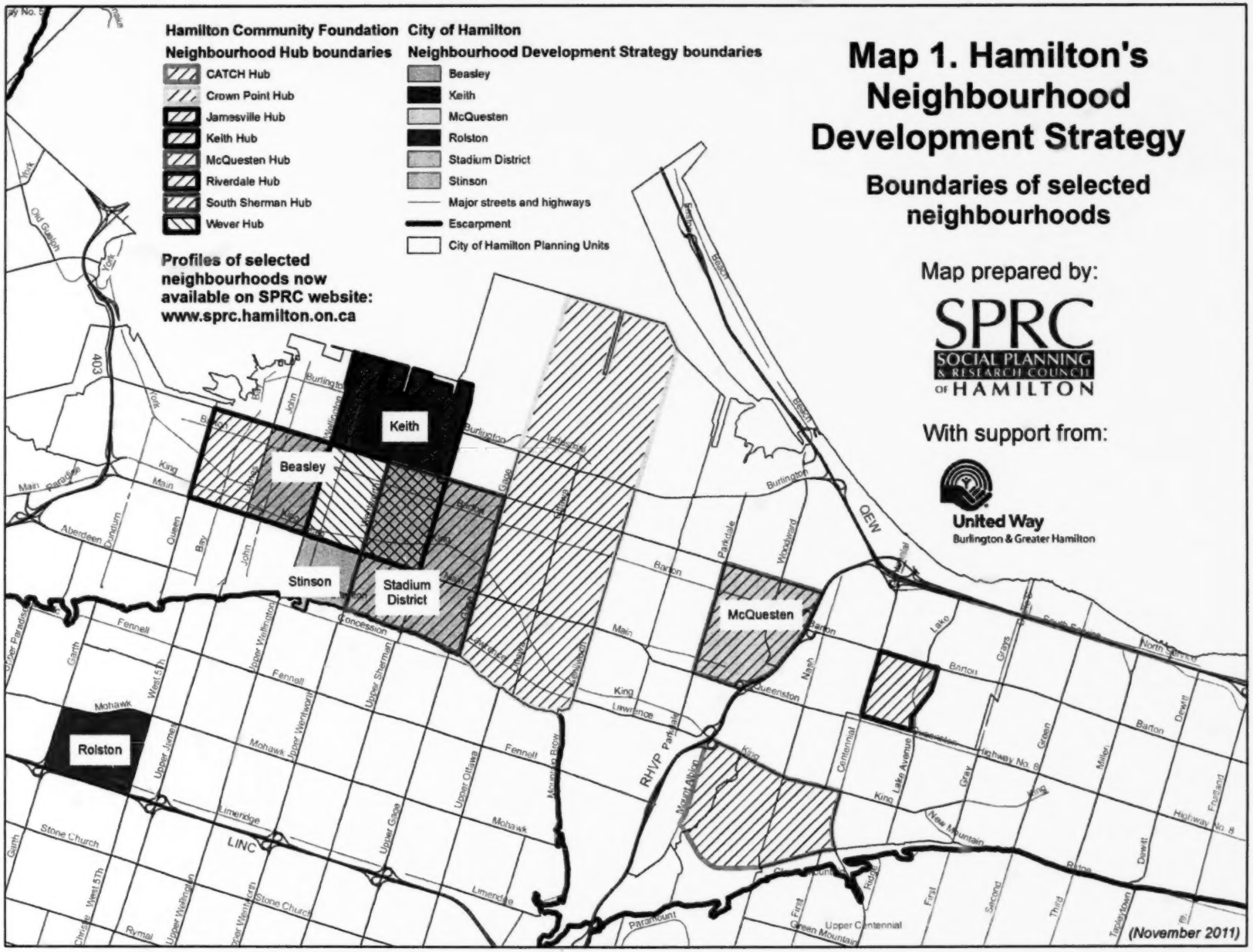
After the work was underway on these profiles, the City of Hamilton began work on its Neighbourhood Development Strategy. The United Way and the SPRC are now partners, along with other agencies, in the City's community development efforts to engage residents, service providers, and city departments to increase collaboration and develop and implement neighbourhood plans. Recently, the list of neighbourhoods that will be part of the strategy was announced: Beasley, Keith, McQuesten, Rolston, Stadium District and Stinson. Most of these neighbourhoods were already part of the selected neighbourhoods for this report, including the Stadium District whose boundaries match the South Sherman Hub. The only additional neighbourhoods are Beasley (which is half of the Jamesville Hub) and Stinson. Profiles for these two neighbourhoods were added to this report

Map 1 shows the geographic distribution within the city of all of the neighbourhoods discussed, are all of which are profiled in the following pages of this report.

It is important to note that some of the boundaries are not set in stone. The resident-focused process that created the HCF's neighbourhood hubs in particular means that boundaries of the hubs have sometimes shifted with time and with changes to which residents who are involved in the Hubs. The boundaries illustrated by Map 1 are based on previously published documents, as well as updates to

boundaries that have come to our attention. We welcome feedback if there are additional changes to boundaries that have occurred, so that we can update this document.

The data in the profiles for each neighbourhood correspond to the boundaries presented in Map 1, with the exception of the CATCH neighbourhood, where best available data was only available for a slightly larger area that is bounded by the Red Hill Valley Expressway to the West (instead of Mount Albion). (The number of additional residents is fairly small.)

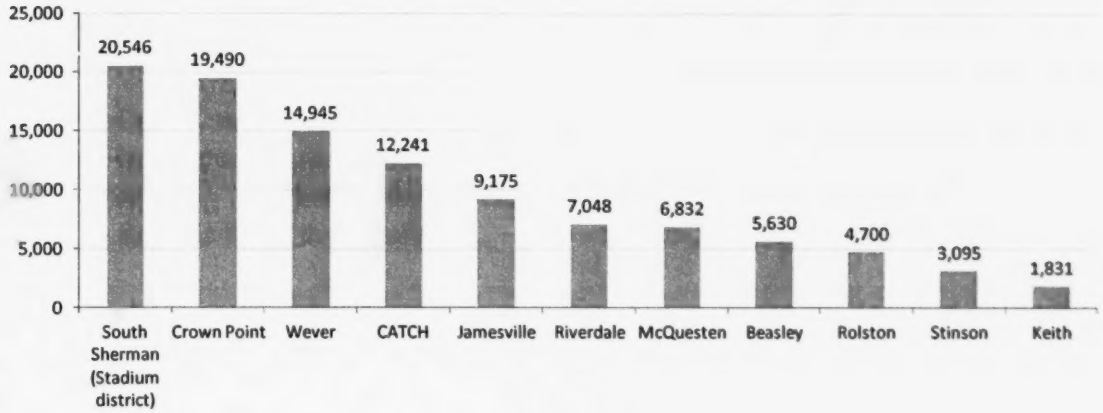

Hamilton Community Foundation
Neighbourhood Hub boundaries
CATCH Hub
Crown Point Hub
Jamesville Hub
Keith Hub
McQuesten Hub
Riverdale Hub
South Sherman Hub
Wever Hub
City of Hamilton
Neighbourhood Development Strategy boundaries
Beasley
Keith
McQuesten
Rolston
Stadium District
Stinson
Major streets and highways
Escarpment
City of Hamilton Planning Units
Profiles of selected neighbourhoods now available on SPRC website: www.sprc.hamilton.on.ca
Map 1. Hamilton's Neighbourhood Development Strategy
Boundaries of selected neighbourhoods
Map prepared by:
SPRC
SOCIAL PLANNING & RESEARCH COUNCIL OF HAMILTON
With support from:
United Way
Burlington & Greater Hamilton
Keith
Beasley
Stinson
Stadium District
McQuesten
Rolston
(November 2011)

1.3 Selection of content for neighbourhood profiles and data sources

The profiles in this report are meant to give some highlights of the demographic, income and health data available for these neighbourhoods. The selected indicators are based in large part on what service providers often ask the SPRC for when preparing strategic plans or grant proposals: age breakdowns, poverty rates, cultural diversity, educational attainment and housing, as well as health outcomes.

The profiles are each presented with comparisons between the neighbourhood and the overall City of Hamilton. To facilitate these comparisons, all data are presented as proportions of the overall population. The actual population of each selected neighbourhood varies substantially (Chart 1). South Sherman is the largest neighbourhood, with over 20,000 residents, more than ten times the size of Keith, with just over 1,800. The law of averages means that the larger the neighbourhood the more likely that the indicators will be closer to the average for the entire city. But in each of the larger neighbourhoods profiled there are many disparities that are not captured in this report which just looks at the overall rates for the entire larger area.

Chart 1. Population in each selected neighbourhood, City of Hamilton, 2006 Census



The demographic data is from the last census (2006). While the data are now five years old, the census is the only source for detailed data at the neighbourhood level. The poverty data is also from the census and uses the Low Income Cut Off (before tax) as the poverty line. More information about poverty statistics and how they are calculated is available in the *Incomes and Poverty in Hamilton* report on the SPRC website. The activity limitation data also comes from the census, and is the only measure of disability available at the neighbourhood level. More information about disability statistics such as activity limitation is available in the *Hamilton's Social Landscape* report on the SPRC website.

Other data include selected indicators from the Hamilton Spectator's Code Red series. The health data from Code Red includes usage of health care facilities (such as hospital admissions and emergency rooms visits) and death records (to calculate average age of death). The average of death has often been reported as "life expectancy", which is a similar measure but not an accurate term, as life expectancy data is much more difficult to calculate and not available by neighbourhoods. The age at death data in Code Red is simply the average age at time of death of all the people in each neighbourhood who died in the 2006-2008 time period. It is important to note that average age of death is influenced by a number of factors beyond residents' health, including

the age distribution of each neighbourhood. For example, a neighbourhood with a high concentration of seniors residences, may naturally have a higher average age of death than a nearby neighbourhood, just because there are so many more older residents.

High school completion rates are also from the Hamilton Spectator's Code Red series. They were provided this data by the Hamilton-Wentworth District School Board and the Hamilton-Wentworth Catholic District School Board, and the numbers represent combined data from both boards for each neighbourhood.

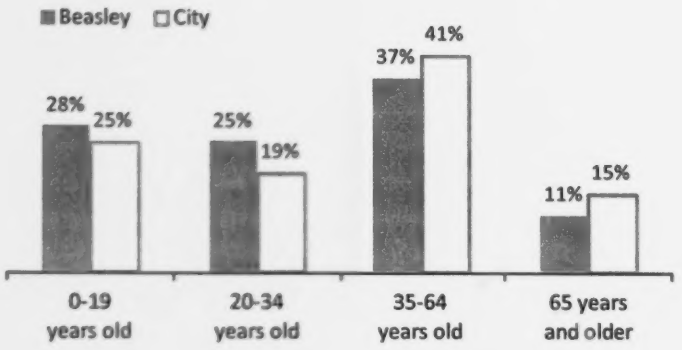
The data in this report are a complement to another recent report the SPRC completed for the United Way: *Hamilton's Social Landscape*. This comprehensive report is available on the SPRC website and tracks many demographic trends in Hamilton since 1996. *Hamilton's Social Landscape* also provides a series of maps that shows the distribution of selected indicators across all of Hamilton's neighbourhoods.

These neighbourhood profiles paint just a small part of the diversity and complexity of each neighbourhood and do not touch upon other important indicators of neighbourhood health such as community assets, safety or connections between neighbours. These profiles should not be used in isolation, but it is hoped that this report offer some frequently requested data that can be helpful to residents, service providers and funders in their efforts to improve quality of life for all residents.

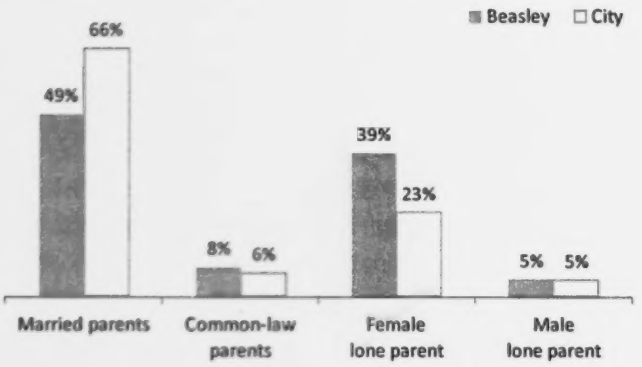
NEIGHBOURHOOD PROFILES

POPULATION CHARACTERISTICS

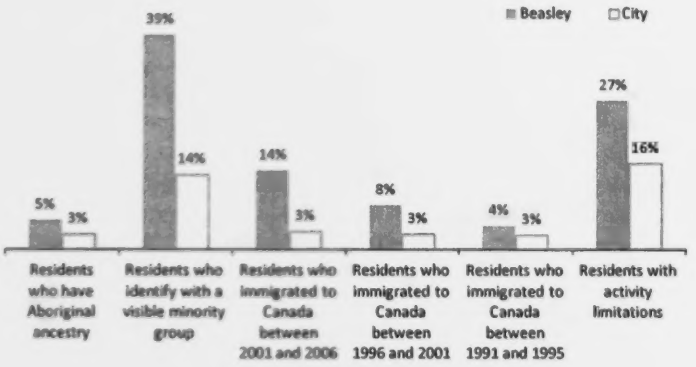
AGE GROUPS



FAMILIES WITH CHILDREN UNDER 18



POPULATION GROUPS



KEY FINDINGS

Beasley has a higher proportion of children and young adults in its population, than the city as a whole. About 11% of Beasley population are seniors compared to 15% for the city.

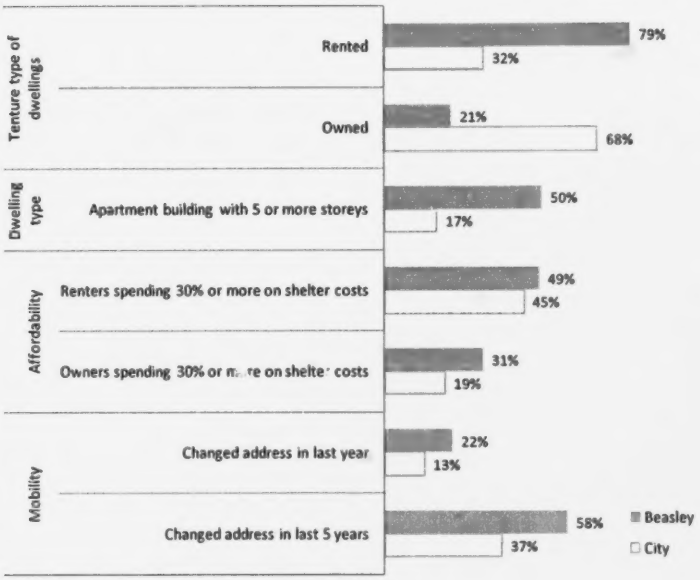
More than four in ten Beasley families with children are headed by lone parents (both male and female combined).

Almost four in ten Beasley residents identify with a visible minority group, almost three times higher than the average for the city. Beasley is one of Hamilton's "arrival cities" with 14% of the area's residents being newcomer immigrants compared to just 3% for the city as a whole. Beasley has a higher proportion of residents with Aboriginal ancestry (5% compared to 3% for the city).

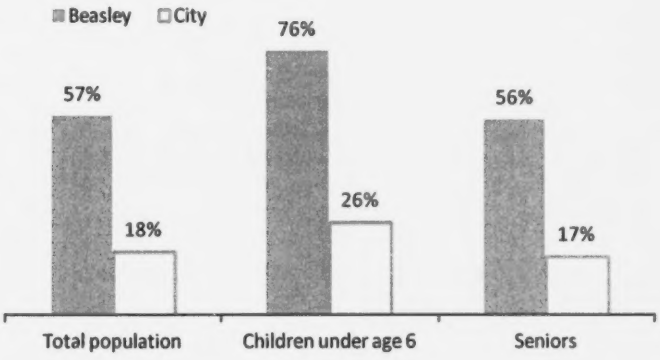
There is a larger proportion of persons of activity limitations in Beasley as compared to the city (27% vs. 16%).

INCOME AND HOUSING

HOUSING AND MOBILITY



POVERTY RATES



KEY FINDINGS

The vast majority of homes in Beasley are rented (79%) compared to 32% for the city as a whole.

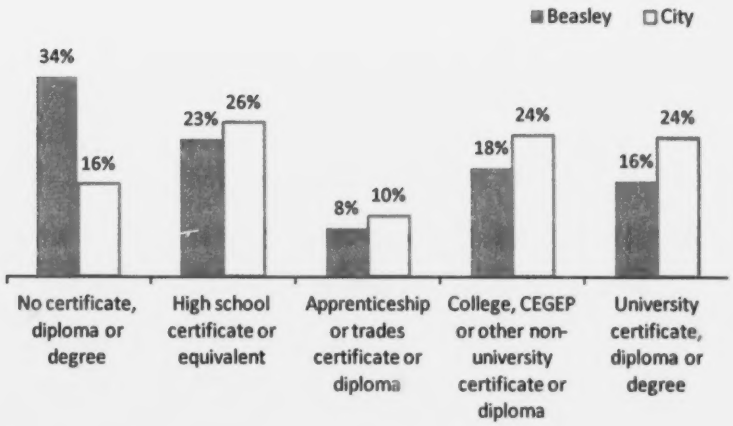
Half of Beasley dwellings are in apartment buildings with five or more stories. There are higher rates of people living in unaffordable housing in Beasley, especially for home owners.

Beasley residents are more mobile than the average for the city. Almost 6 in 10 Beasley residents stay in their homes for less than five years.

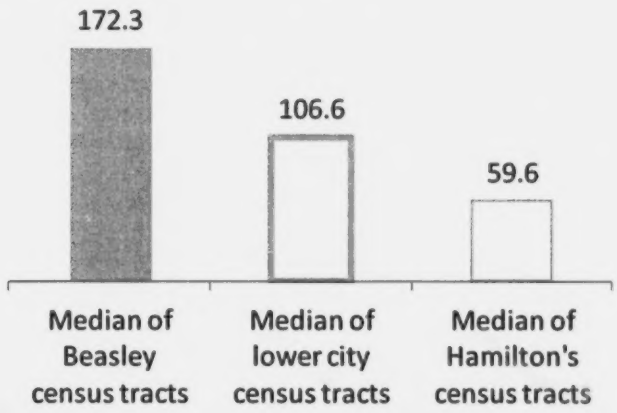
Poverty rates in Beasley are three times higher than the average for the city. Almost 6 in 10 Beasley residents live on incomes below the poverty line.

EDUCATION

HIGHEST EDUCATION COMPLETED, PERSONS AGED 25-64



HIGH SCHOOL NON-COMPLETION RATE PER 1,000 STUDENTS



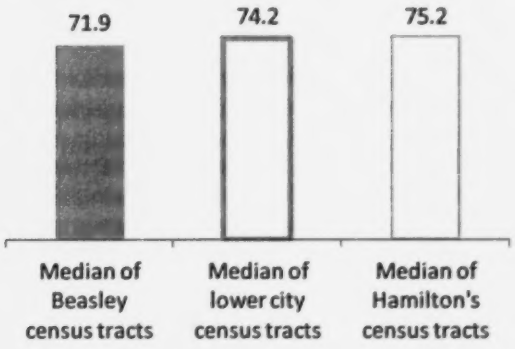
KEY FINDINGS

Beasley has a much higher proportion of residents with no completed education than the average for the city (34% vs. 16%). In all other education categories (from high school to university) Beasley has a slightly lower proportion of completion rates.

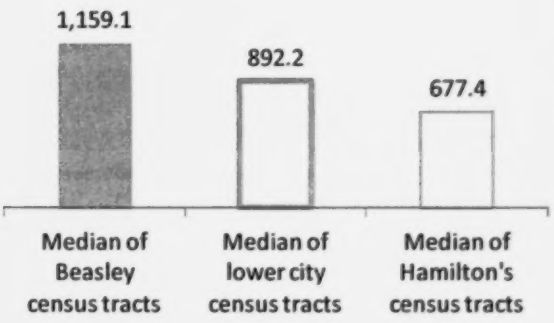
More than 17% of Beasley students do not complete their high school diploma.

HEALTH

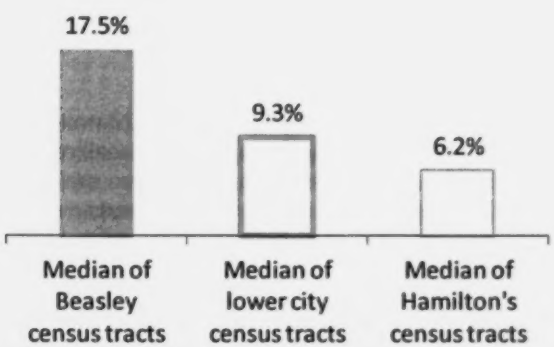
AVERAGE AGE OF DEATH



EMERGENCY ROOM VISITS PER 1000 RESIDENTS PER YEAR



PERCENTAGE OF ER VISITORS REPORTING NO FAMILY DOCTOR



KEY FINDINGS

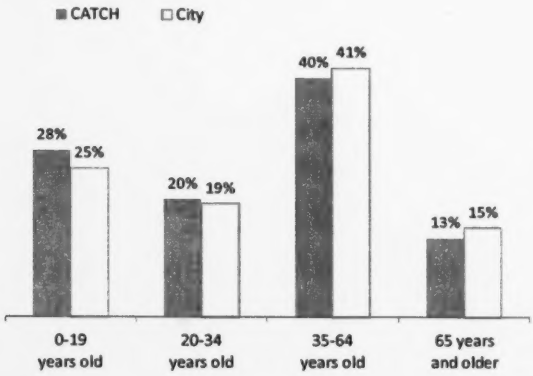
The average age of death in Beasley is 3.3 years younger than the average age for the city as a whole.

Beasley residents are more likely to visit an emergency room as compared to the city. On average there are an additional 480 emergency room visits per thousand residents in Beasley.

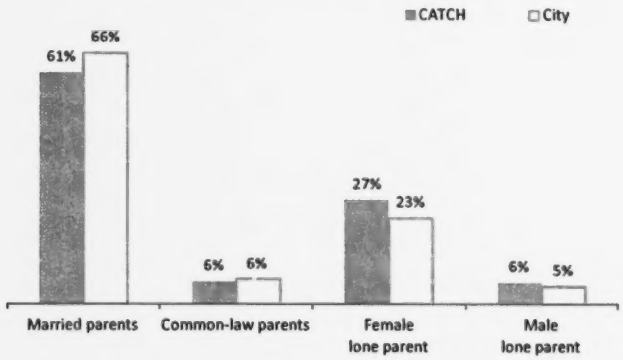
17.5% of Beasley residence visiting an emergency room report having no family doctor, almost three times the rate for the city overall.

POPULATION CHARACTERISTICS

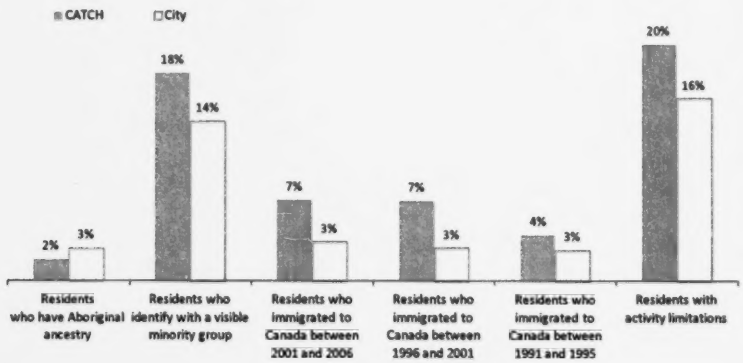
AGE GROUPS



FAMILIES WITH CHILDREN UNDER 18



POPULATION GROUPS



KEY FINDINGS

The age distribution in the CATCH (Community Access to Child Health) neighbourhood is younger than the city as a whole, with more children and fewer seniors.

The distribution of family types in CATCH is very similar to the city. The largest group of families with children are led by married parents (61%, compared to 66% for the city). There is a larger proportion of single parent-led households in CATCH (33% compared to 28% for the city).

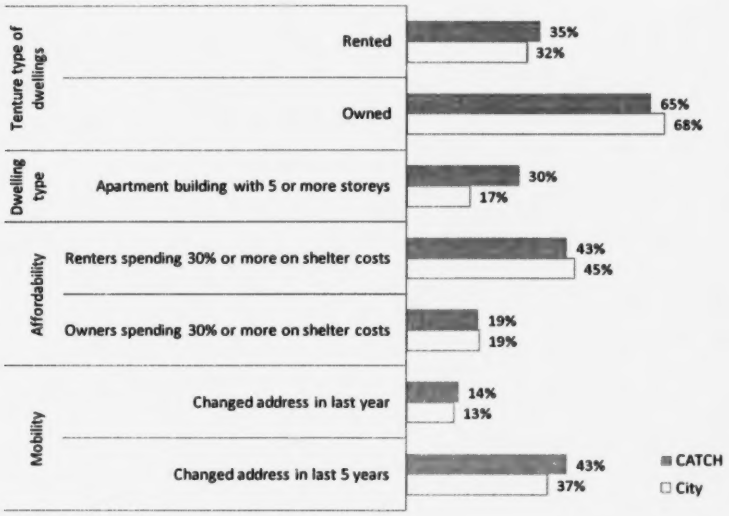
There are more people who identify with a visible minority group in CATCH than in Hamilton (18% vs. 14%), but fewer who have Aboriginal ancestry.

There are larger proportions of immigrants in all periods examined as compared to the city. The proportion of immigrants who arrived in Canada in the most recent ten year period (1996-2006) is more than double the rate for the city as a whole (14% vs. 6%).

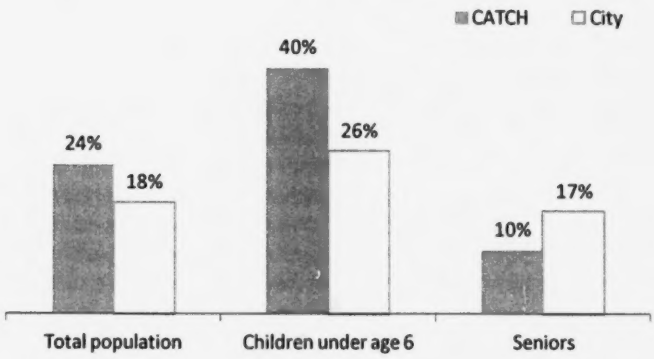
There is a larger proportion of persons with activity limitations in CATCH as compared to the city (20% vs. 16%).

INCOME AND HOUSING

HOUSING AND MOBILITY



POVERTY RATES



KEY FINDINGS

The distribution of housing tenure types in CATCH is similar to the city, with about one third renting, and two thirds owning their home.

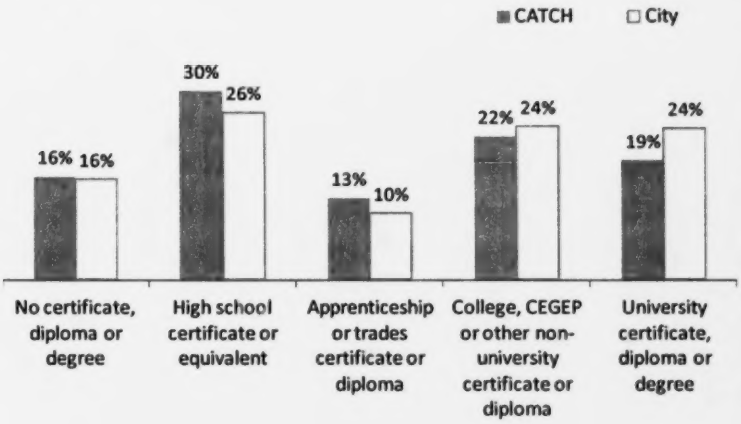
While more than four in ten households live in unaffordable housing in CATCH, the rate is slightly lower than for renters across Hamilton.

CATCH residents are more mobile, with the rate of people moving either in a given year, on in a five year period is slightly higher in CATCH than in the city.

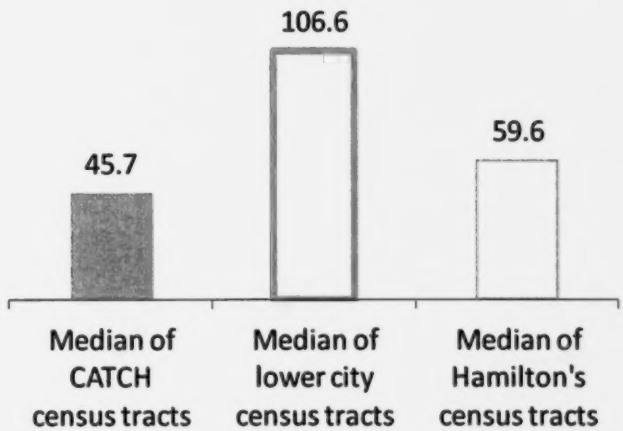
The average poverty rate for the CATCH neighbourhood is 24%, compared to 18% for the city. Young children under six have a higher poverty rate in CATCH than in the city, but seniors are much less likely to live on incomes below the poverty line (10% senior poverty rate for CATCH, compared to 17% for the city).

EDUCATION

HIGHEST EDUCATION COMPLETED, PERSONS AGED 25-64



HIGH SCHOOL NON-COMPLETION RATE PER 1,000 STUDENTS



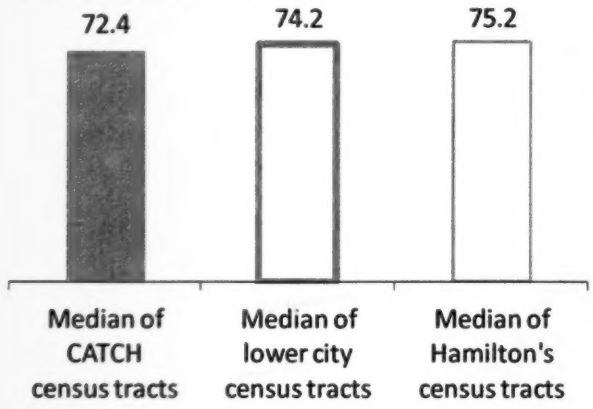
KEY FINDINGS

The rates of completed education in CATCH are similar to the city, but with slightly more residents with a high school certificate, and slightly fewer with a college or university diploma.

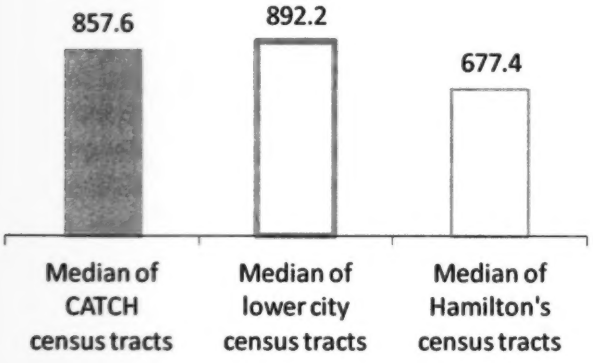
The rate of high school non-completion is lower in CATCH as compared to the city.

HEALTH

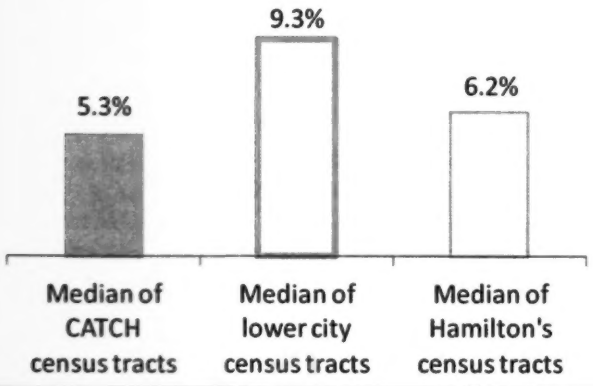
AVERAGE AGE OF DEATH



EMERGENCY ROOM VISITS PER 1000 RESIDENTS PER YEAR



PERCENTAGE OF ER VISITORS REPORTING NO FAMILY DOCTOR



KEY FINDINGS

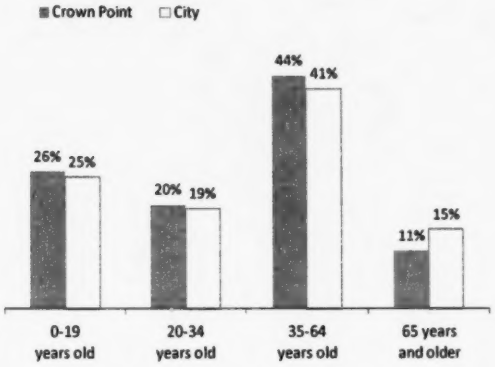
The average age of death in CATCH is 2.8 years less than the city, and 1.8 years less than the lower city.

CATCH residents are less likely to visit an emergency room as compared to the lower city. Comparing to the city overall, CATCH residents visit an ER 180 more times per 1,000 residents.

5.3% of CATCH residents visiting an emergency room have no family doctor, a rate that is lower than the city (6.2%) and the lower city (9.3%).

POPULATION CHARACTERISTICS

AGE GROUPS



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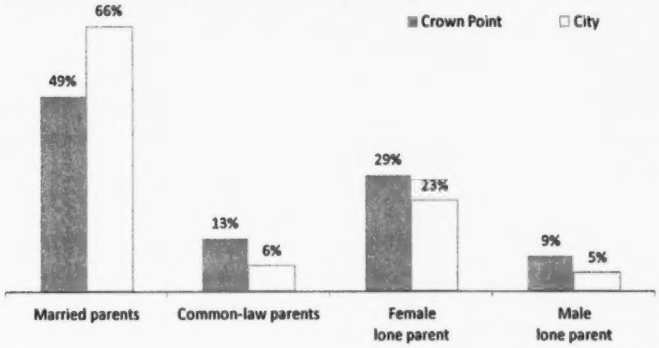
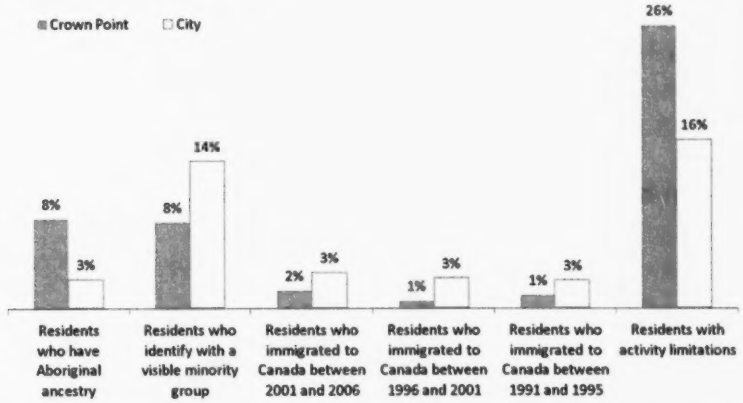


POPULATION GROUPS



KEY FINDINGS

There are similar proportions of children in Crown Point and Hamilton.

There are fewer seniors living in Crown Point, compared to the city (11% vs. 15%).

Fewer parents in Crown Point are married than in the city (49% vs. 66%). But there are more than twice as many parents in common-law relationships in Crown Point than in Hamilton (13% vs. 6%).

Nearly three in ten families in Crown Point are led by female lone parents (29%)

There are almost twice as many male lone parents in Crown Point compared to the city (9% vs. 5%).

Almost triple the proportion of residents have Aboriginal ancestry compared to the city (8% vs. 3%). A further analysis reveals that some areas of Crown Point have the highest concentration of Aboriginals in Hamilton.

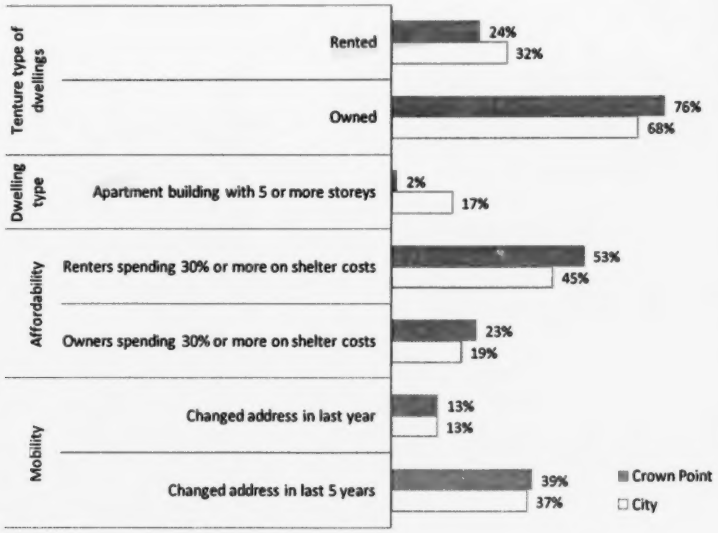
Fewer individuals identify with a visible minority group in Crown Point than in the city (8% vs. 14%).

There are smaller populations of residents who immigrated between 1991 and 2006.

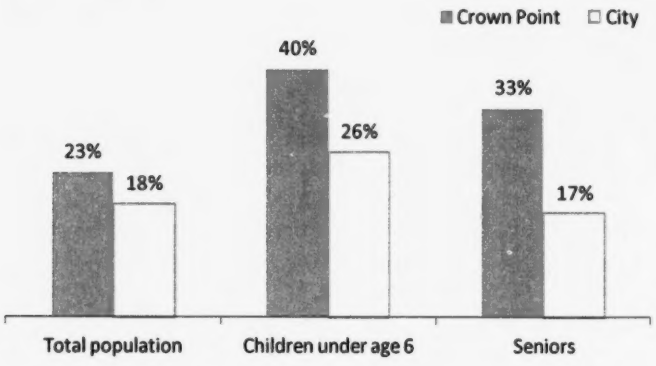
There is a larger proportion of persons with activity limitations in Crown Point than in the city (26% vs. 16%).

INCOME AND HOUSING

HOUSING AND MOBILITY



POVERTY RATES



KEY FINDINGS

The majority of Crown Point residents are homeowners (76%), which is higher than the city's rate (68%).

Less than one quarter of Crown Point residents are renters (24%).

Over half of renters (53%) live in unaffordable housing and spend 30% or more of their income on shelter costs.

Almost a quarter of homeowners (23%) live in unaffordable housing, spending 30% or more of their income on shelter costs.

Almost four in ten residents in Crown Point changed addresses in the last 5 years which is close to the average for the city (37%).

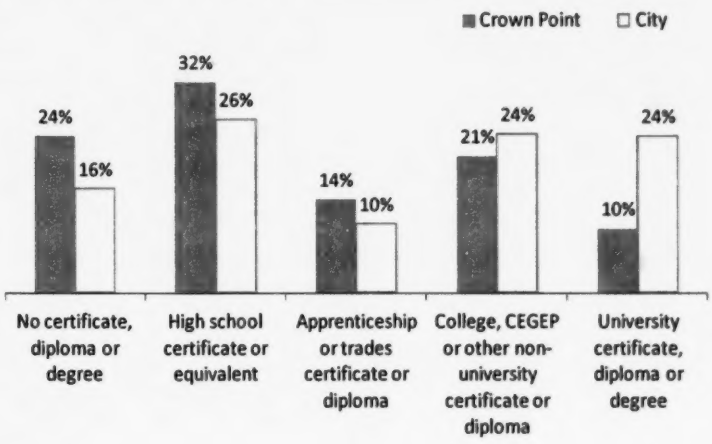
The poverty rate in Crown Point is higher than for the city (23 vs. 18%).

Four in ten young children in Crown Point live in poverty (36%).

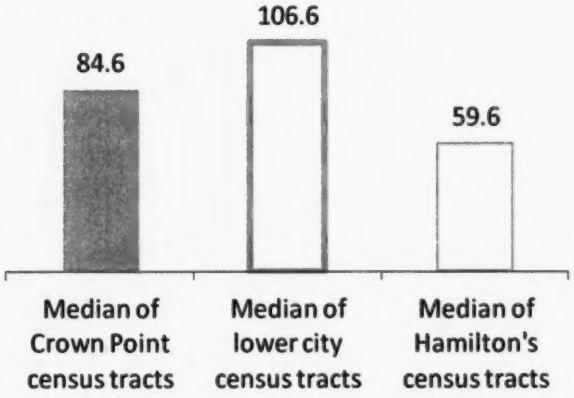
One third of seniors in Crown Point are living in poverty.

EDUCATION

HIGHEST EDUCATION COMPLETED, PERSONS AGED 25-64



HIGH SCHOOL NON-COMPLETION RATE PER 1,000 STUDENTS



KEY FINDINGS

Almost one in four Crown Point residents (24%) do not have a certificate, diploma or degree, which is at higher than the city as a whole (16%).

Almost one third of Crown Point residents (32%) have only a high school certificate or equivalent, which is higher the city's rate (26%).

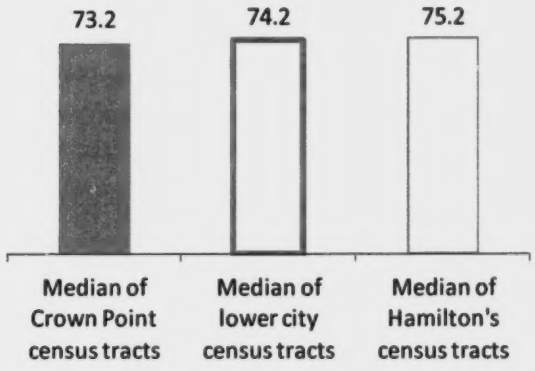
A smaller group of Crown Point residents (10%) have university education, compared to the city (24%).

A higher proportion of Crown Point residents (14%) have an apprenticeship/trades certificate/ diploma than the city's overall population (10%).

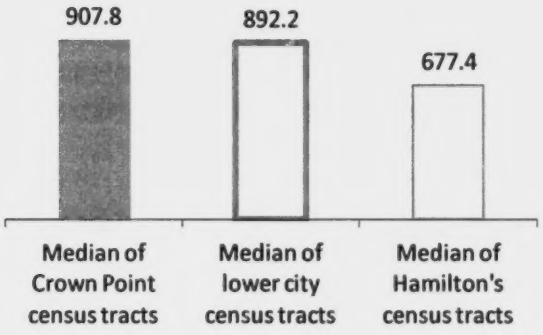
Compared to Hamilton, more students don't complete high school in Crown Point. But Crown Point's rate of non-completion is better than the lower city's rate.

HEALTH

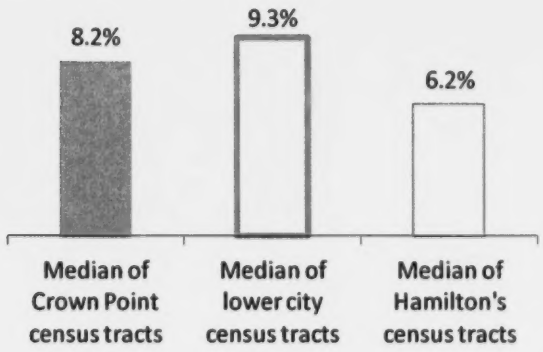
AVERAGE AGE OF DEATH



EMERGENCY ROOM VISITS PER 1,000 RESIDENTS PER YEAR



PERCENTAGE OF ER VISITORS REPORTING NO FAMILY DOCTOR



KEY FINDINGS

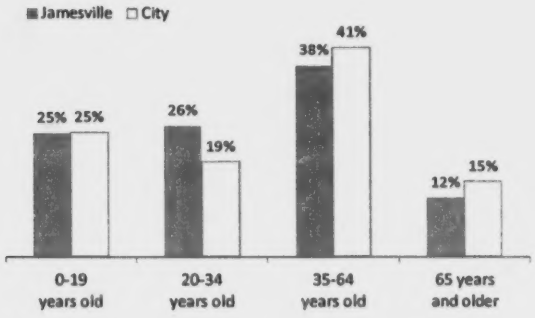
The average age of death in Crown Point is 73.2 years old, which is 2.0 years younger than the city's average age of death and 1.0 years younger than lower city residents.

The rate of emergency room visits is slightly higher in Crown Point than in Hamilton.

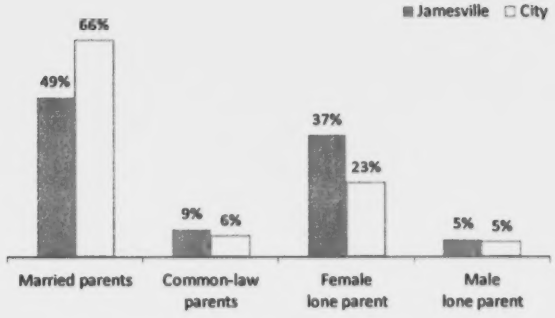
The rate of Crown Point residents who visit an emergency room and do not have a family doctor is higher than for the city overall, but lower than the median rate for the lower city.

POPULATION CHARACTERISTICS

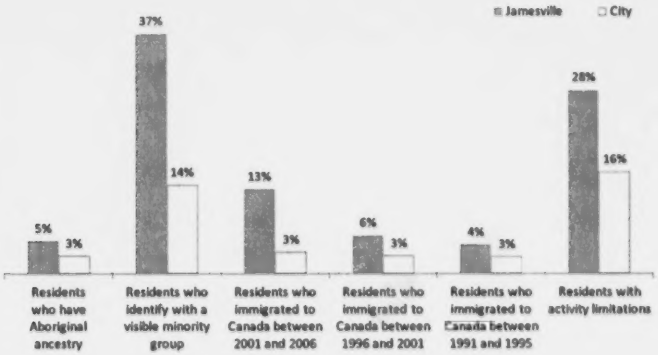
AGE GROUPS



FAMILIES WITH CHILDREN UNDER 18



POPULATION GROUPS



KEY FINDINGS

There are equal proportions of children in Jamesville and Hamilton.

There are as many young adults (ages 20-34) as there are children in Jamesville. There is a higher rate of young adults in Jamesville than in Hamilton (26% vs. 19%).

There is a smaller proportion of seniors in Jamesville than in the city (12% vs. 15%).

58% of Jamesville's families with children are headed by two parents (married or common law), compared to 72% of the city's families.

Over one third of the parent population are female lone parents (37%).

Double the rate of people who identify as Aboriginal (4%) live in Jamesville than the city as a whole (2%).

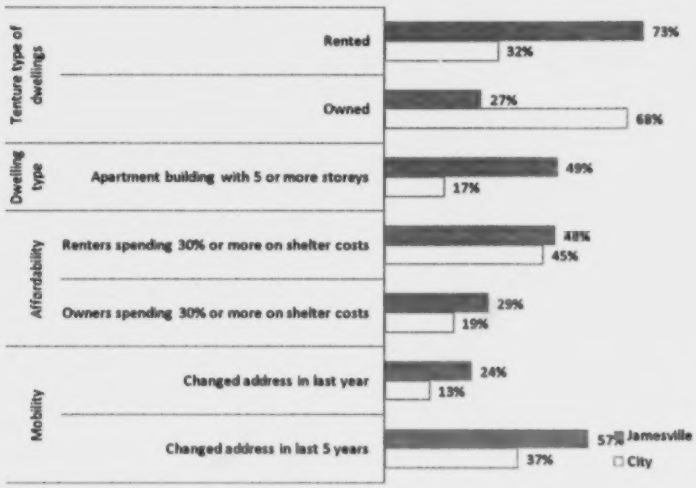
Over one third (37%) of Jamesville residents identify with a visible minority group, which is three times higher than the city (14%).

Jamesville is one of Hamilton's "Arrival Cities", as almost one in five of its residents immigrated to Canada in 1996 or later, compared to the city average of just over one in twenty for this same immigration cohort.

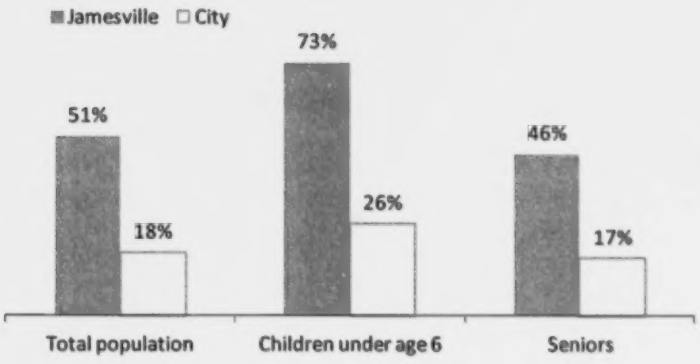
There is a larger proportion of persons with activity limitations in Jamesville than in the city (28% vs. 16%).

INCOME AND HOUSING

HOUSING AND MOBILITY



POVERTY RATES



KEY FINDINGS

Almost three quarters of Jamesville residents (73%) are renters compared to just under one third of the city's overall population (32%).

Less than one third of Jamesville residents are homeowners.

Almost exactly half of Jamesville residents live in apartment buildings with 5 or more storeys.

Close to half the proportion of renters (48%) live in unaffordable housing and spend 30% or more of their income on shelter costs.

Residents in Jamesville change addresses in more often than the average for the city.

The poverty rates in Jamesville are more than double the city average in all groups examined.

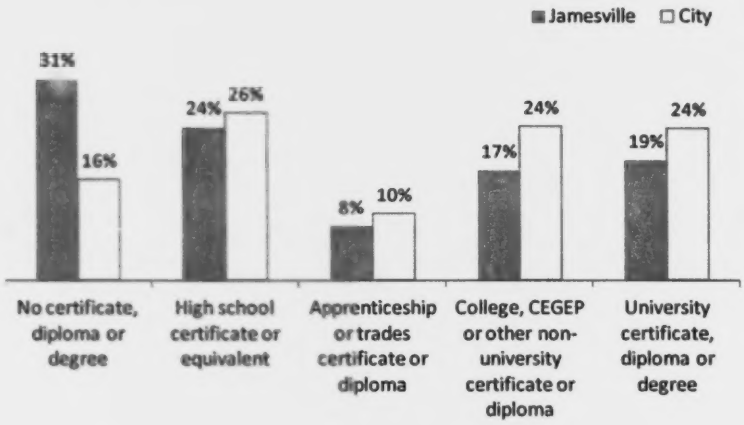
More than half of Jamesville residents (51%) are living in poverty, compared to 18% for the city.

Almost three quarters (73%) of young children in Jamesville are living in poverty.

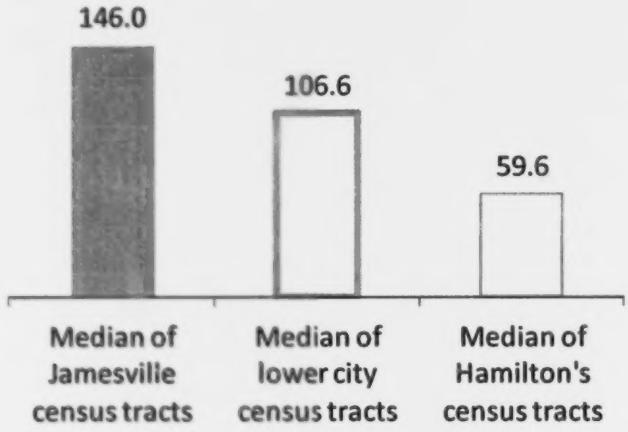
Close to half of Jamesville's seniors are living in poverty (46%).

EDUCATION

HIGHEST EDUCATION COMPLETED, PERSONS AGED 25-64



HIGH SCHOOL NON-COMPLETION RATE PER 1,000 STUDENTS



KEY FINDINGS

Almost one in three Jamesville residents does not have a certificate, diploma or degree, almost double the rate for the city as a whole.

Almost one quarter of the population has a high school certificate or equivalent. which is virtually equal to the city as a whole.

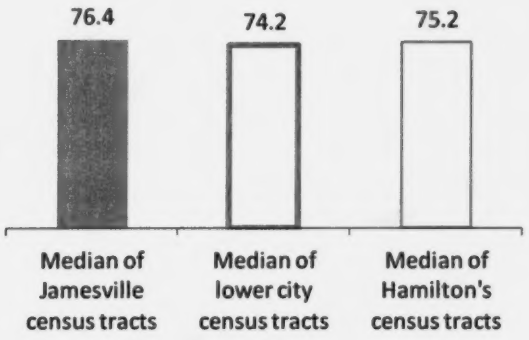
Fewer Jamesville residents have university education compared to the city (19% vs. 24%).

There are fewer Jamesville residents with an apprenticeship/trades certificate/diploma compared to the city (8% vs. 10%).

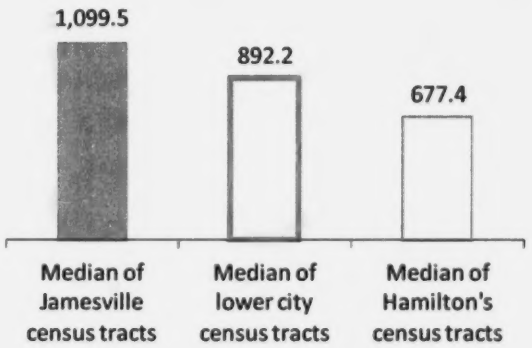
Jamesville has more than double the proportion of students who don't complete high as compared to the lower city and Hamilton.

HEALTH

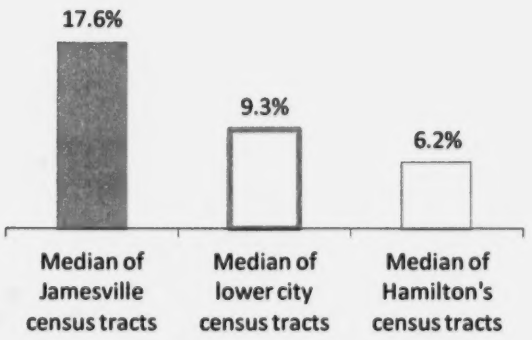
AVERAGE AGE OF DEATH



EMERGENCY ROOM VISITS PER 1,000 RESIDENTS PER YEAR



PERCENTAGE OF ER VISITORS REPORTING NO FAMILY DOCTOR



KEY FINDINGS

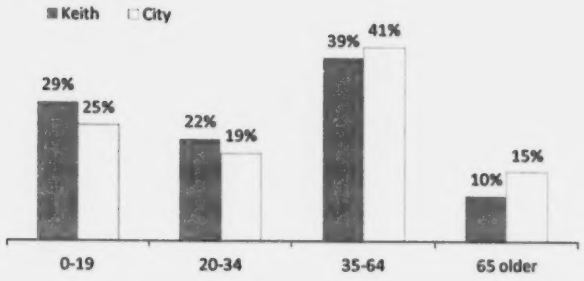
The average age of death in Jamesville is 76.4 years old which is 1.2 years older than the city and 2.2 years older than the lower city. But within the neighbourhood, there is a wide range of average ages of death for each of Jamesville's four census tracts. The average age of death ranges from over 80 years in the south western quadrant of Jamesville down to just under 67 years in the north eastern quadrant.

The rate of emergency room visits is much higher in Jamesville than in Hamilton. On average, there is over 400 additional visits to the emergency room for every 1,000 Jamesville residents per year than the city as a whole.

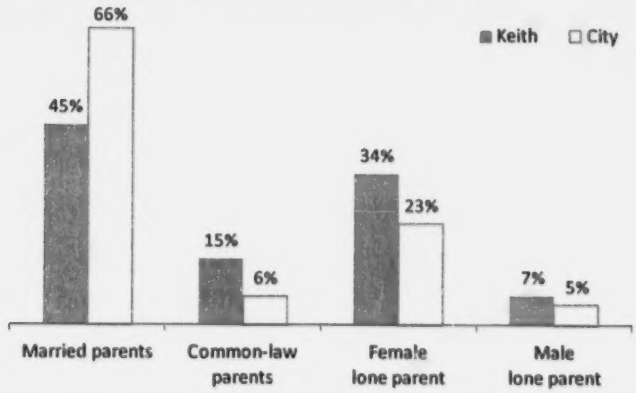
Compared Hamilton's overall population, almost triple the proportion of Jamesville residents who visit an emergency room do not have a regular doctor (17.6%).

POPULATION CHARACTERISTICS

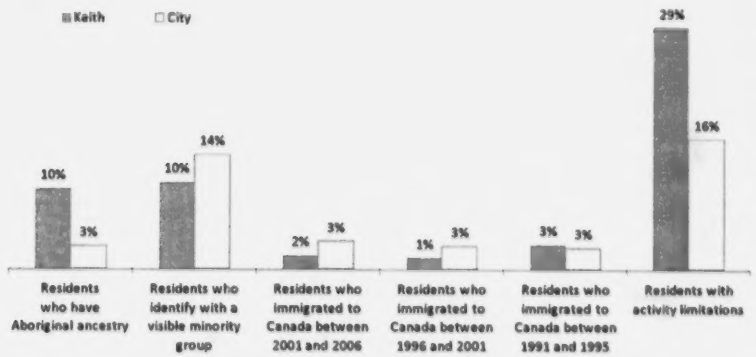
AGE GROUPS



FAMILIES WITH CHILDREN UNDER 18



POPULATION GROUPS



KEY FINDINGS

Children are a large part of the Keith neighbourhood. Almost three in ten of the neighbourhood's residents are younger than 20 years old.

There is a higher rate of young adults (ages 20-34) in Keith than in Hamilton (22% v. 19%).

Compared to the city's senior population, there are fewer seniors living in Keith.

There almost as many lone parents (41% of families) as there are married parents (45% of families).

More than triple the proportion of have Aboriginal ancestry compared to the city (10% vs. 3%).

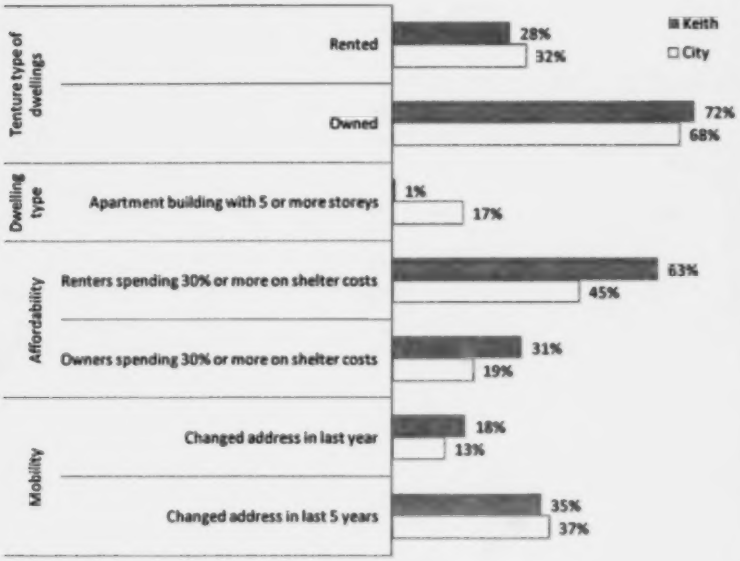
Fewer individuals identify with a visible minority group in Keith than in the city overall (10% vs. 14%).

Compared to the city, there is a smaller population of residents who immigrated in the most recent ten year period between 1996 and 2006 (3% of Keith's population).

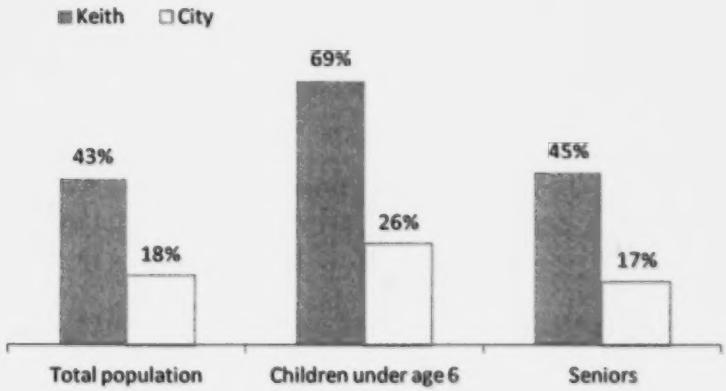
There is a larger proportion of Keith with activity limitations in Jamesville than in the city (29% vs. 16%).

INCOME AND HOUSING

HOUSING AND MOBILITY



POVERTY RATES



KEY FINDINGS

The housing tenure profile in Keith is somewhat similar to the city as a whole, with slightly more owners in Keith, than the city (72% in Keith, compared to 68% homeowners in the city). Slightly less than three in ten residents in Keith are renters.

More than six in ten renters in Keith live in unaffordable housing and spend 30% or more of their income on shelter costs.

One third of homeowners also live in unaffordable housing and spend 30% or more of their income on shelter costs.

Comparing the city's overall population's statistics, fewer Keith residents changed address in last 5 years.

The poverty rates in Keith are more than double the city average in all groups examined.

More than four in ten Keith residents (43%) are living in poverty.

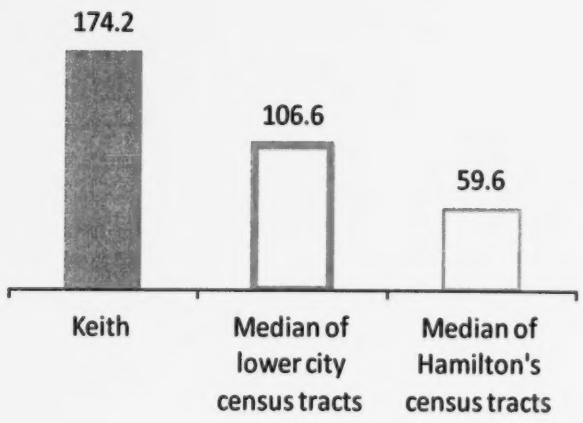
Almost seven in ten Keith children are living in poverty.

Close to half of Keith's senior population are living in poverty (45%).

EDUCATION

HIGHEST EDUCATION COMPLETED, PERSONS AGED 25-64

HIGH SCHOOL NON-COMPLETION RATE PER 1,000 STUDENTS



KEY FINDINGS

Almost one in three Keith residents (37%) does not have a certificate, diploma or degree which more than double the rate for the city as a whole.

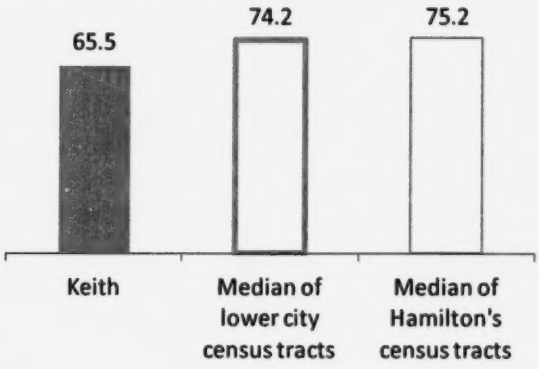
Just over one third of the Keith population (34%) has a high school certificate or equivalent, compared to just over one quarter for the city (26%).

A small group of Keith residents (7%) have a university education compared to the city (24%).

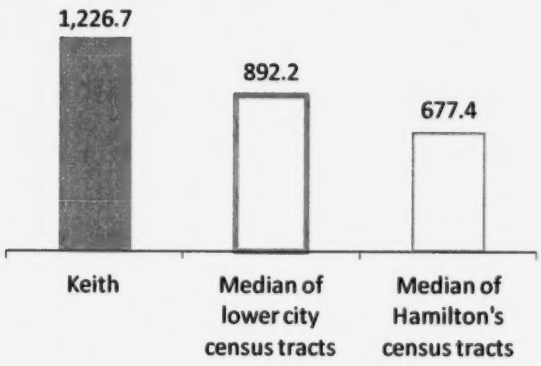
Compared to Hamilton, the rate of students not completing high school is almost three times as high in Keith. The neighbourhood's high school dropout rate is also higher than the lower city.

HEALTH

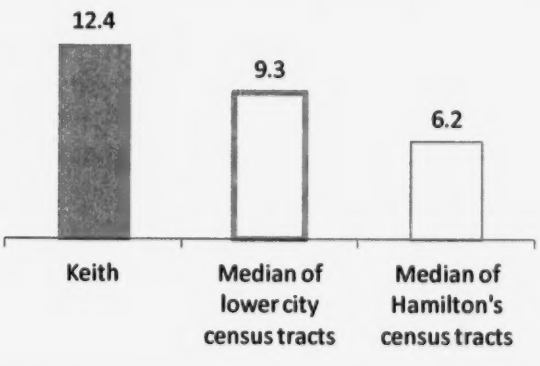
AVERAGE AGE OF DEATH



EMERGENCY ROOM VISITS PER 1,000 RESIDENTS PER YEAR



PERCENTAGE OF ER VISITORS REPORTING NO FAMILY DOCTOR



KEY FINDINGS

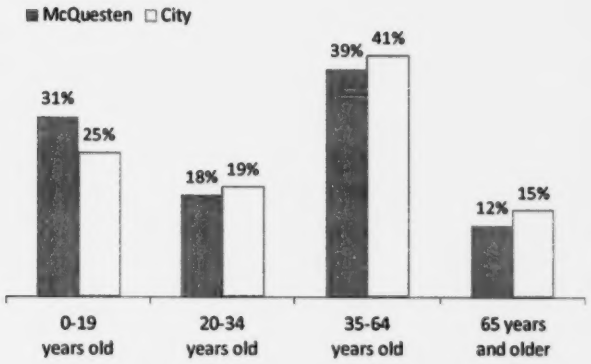
The average age of death in Keith residents is 65.5 years old which is almost 8.7 years younger than the average age of death for the city and almost 9.7 years younger in the lower city.

The rate of emergency room visits is much higher in Keith than in Hamilton. On average, there are almost 550more visits to the emergency room for every 1,000 Keith residents per year than the city as a whole.

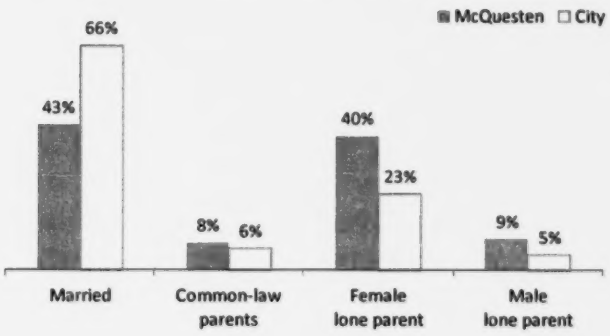
Compared to Hamilton, double the proportion of Keith residents who visit an emergency room do not have a family doctor.

POPULATION CHARACTERISTICS

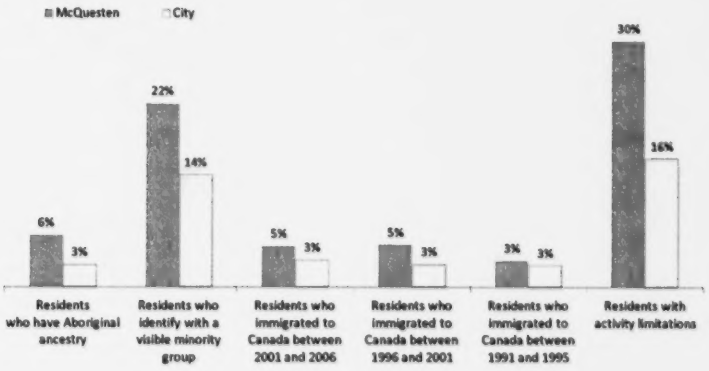
AGE GROUPS



FAMILIES WITH CHILDREN UNDER 18



POPULATION GROUPS



KEY FINDINGS

Children are a large part of the McQuesten neighbourhood, with about 31% of the population younger than 20 years old.

There is a smaller proportion of seniors in McQuesten compared to the city (12% vs. 15%).

The profile of families with children in McQuesten is nearly opposite to the profile for the City of Hamilton. While two thirds of families with children in the city are married and almost one quarter are led by female lone parents, in McQuesten these categories are almost equal (43% are married, 40% are led by female lone parents). The proportion of single dads is almost double in McQuesten as compared to the city (9% vs. 5%).

There is double the proportion of residents who have Aboriginal ancestry in McQuesten.

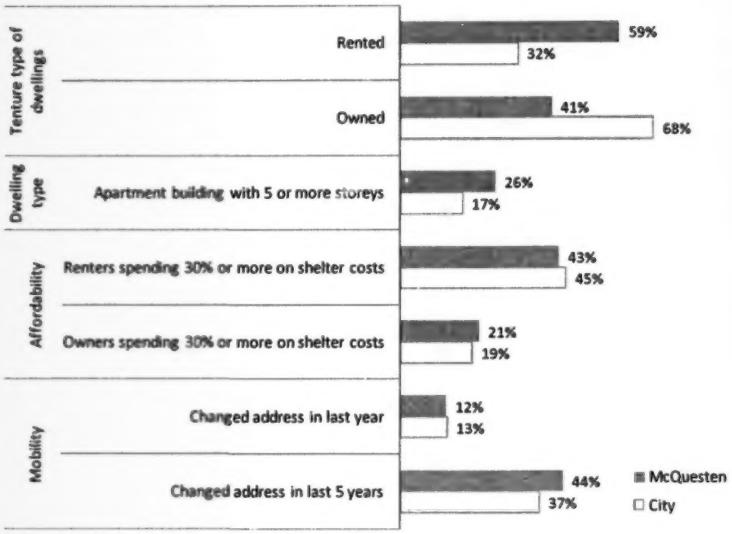
More than one in five (22%) of McQuesten's residents identify with a visible minority group, higher than the 14% rate for the city as a whole.

McQuesten has a higher than average rate of newcomers to Canada among its residents. 10% of McQuesten's population arrived in Canada between 1996-2006, compared to 6% of Hamilton's population.

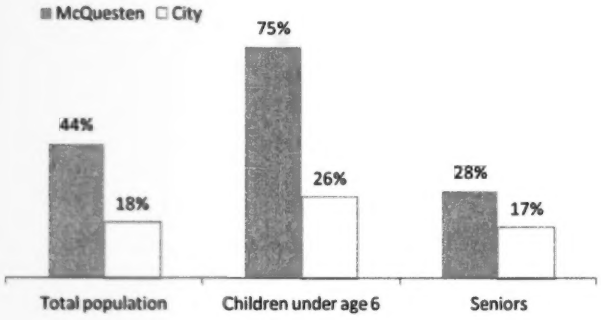
Three in ten McQuesten residents lives with an activity limitation.

INCOME AND HOUSING

HOUSING AND MOBILITY



POVERTY RATES



KEY FINDINGS

Almost six in ten homes in McQuesten are rental units. Home owners are a large group as well, representing 41% of McQuesten's dwellings.

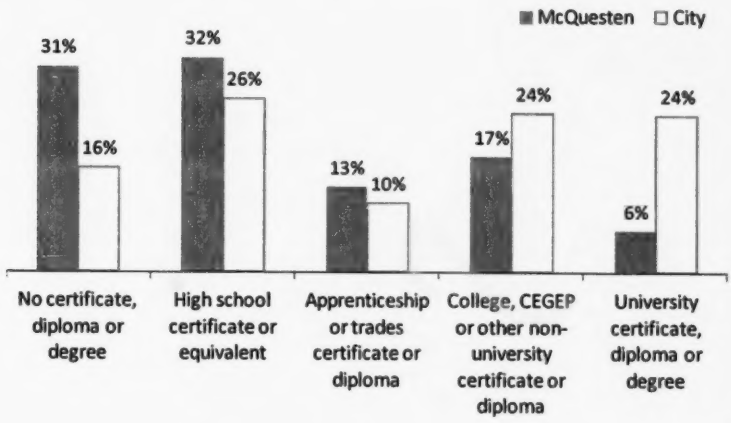
Housing affordability rates are almost exactly the same between McQuesten and the city as a whole. Affordability for renters is better in McQuesten than for the city, which is due in part to the social housing stock that forms a significant part of the neighbourhood.

Residents are slightly more likely to live in the same home as one year ago in McQuesten than the city as a whole. But a higher proportion of residents in McQuesten have moved after five years, as compared to the city (44% vs. 37%).

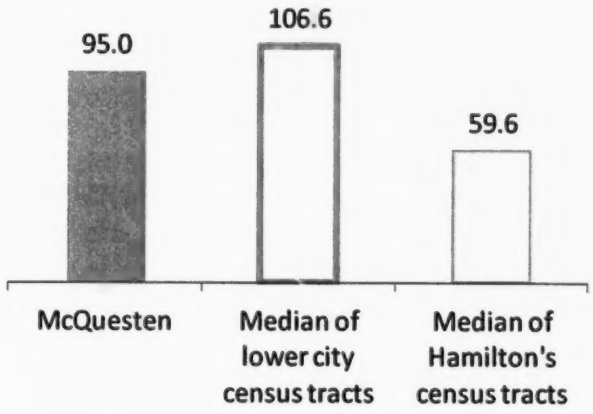
McQuesten's child poverty rate is 75%, almost triple the rate for the city as a whole. The difference between the senior poverty rate in McQuesten and the city is much smaller: McQuesten's senior poverty rate is 28% compared to 17% for the city as a whole.

EDUCATION

HIGHEST EDUCATION COMPLETED, PERSONS AGED 25-64



HIGH SCHOOL NON-COMPLETION RATE PER 1,000 STUDENTS



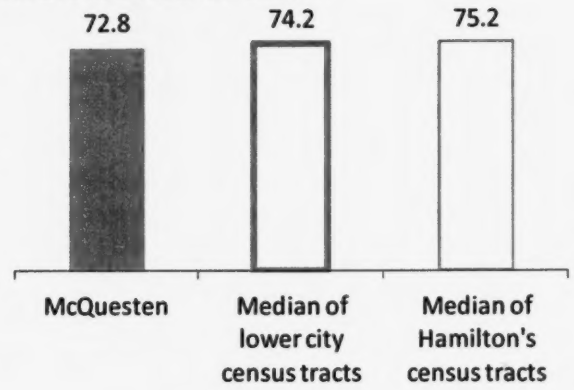
KEY FINDINGS

McQuesten's educational attainment profile is very different from the city's. While one in five Hamiltonians has a university degree, this is true for only one in 16 McQuesten residents. While 16% of Hamiltonians have less than high school education, the rate is almost doubled in McQuesten (31% have no certificate, diploma or degree).

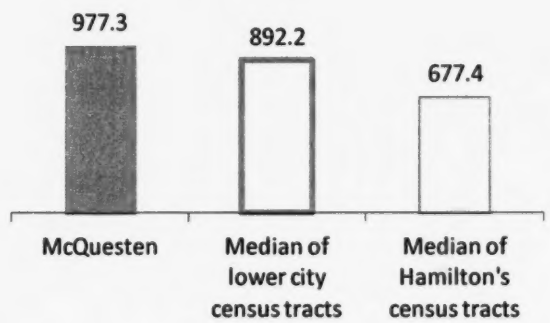
McQuesten's rate of high school non-completion is more than 50% higher than the median for all of Hamilton's census tracts, but slightly better the median for the lower city.

HEALTH

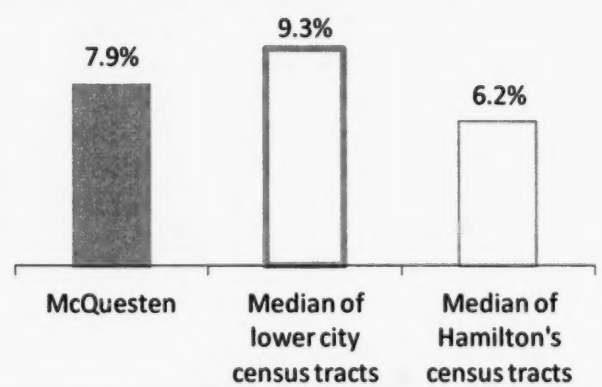
AVERAGE AGE OF DEATH



EMERGENCY ROOM VISITS PER 1,000 RESIDENTS PER YEAR



PERCENTAGE OF ER VISITORS REPORTING NO FAMILY DOCTOR



KEY FINDINGS

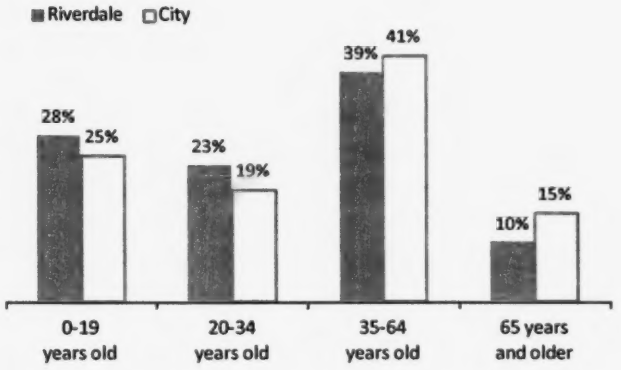
The average age that McQuesten residents die is 72.8 years, 2.4 years less than the average age at which city of Hamilton residents die, and 1.4 years less than in the lower city.

On average, there are more than 300 additional emergency room visits per year by every 1,000 McQuesten residents, compared to the city as a whole

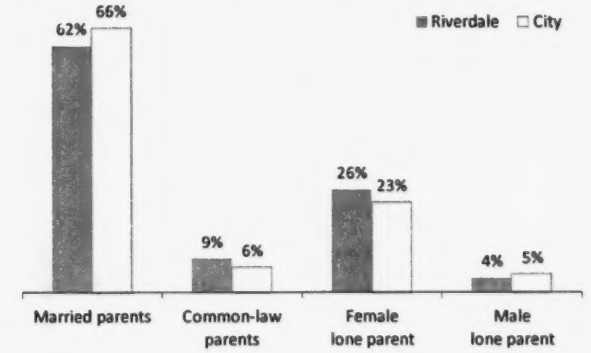
Among McQuesten residents who visit a hospital emergency room, 7.9% do not have a family doctor. While this is higher than the median rate among the city's census tracts (6.2%), the McQuesten rate is much lower than the median rate for census tracts in the lower city alone which is 9.3%.

POPULATION CHARACTERISTICS

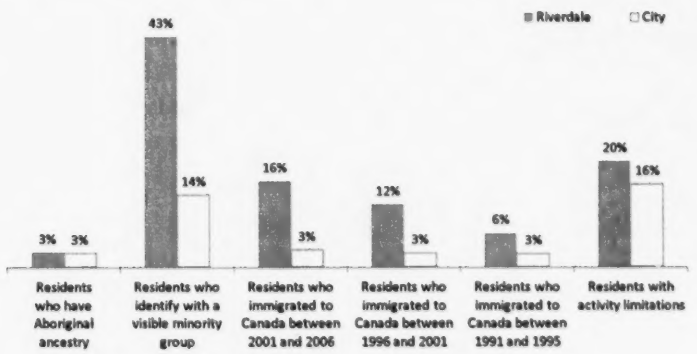
AGE GROUPS



FAMILIES WITH CHILDREN UNDER 18



POPULATION GROUPS



KEY FINDINGS

Children are a large part of the Riverdale neighbourhood. 28% of the neighbourhood's population is younger than 20 years old.

Compared to the city's senior population, there are fewer seniors living in Riverdale (10% vs. 15%).

Slightly fewer families with children are married in Riverdale than in the city (62% vs. 66%).

26% of the parent population are female lone parents, slightly higher than the city's proportion (23%).

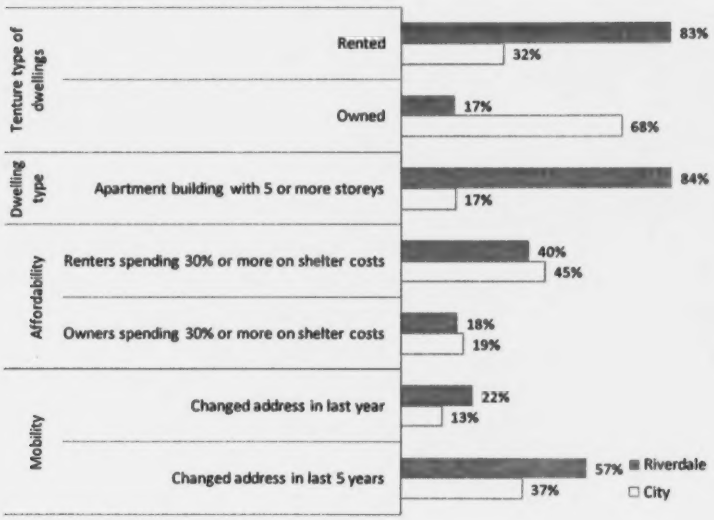
Riverdale is Hamilton's main "Arrival City" and has the largest proportion of recent immigrants in Hamilton. 16% of residents immigrated between 2001 and 2006, more than five times the average for the city. There is triple the proportion of residents who immigrated between 1991 and 2001 compared to the city (18% vs. 6%).

Close to half of the neighbourhood's residents identify with a visible minority group (43%) compared to 14% for the city.

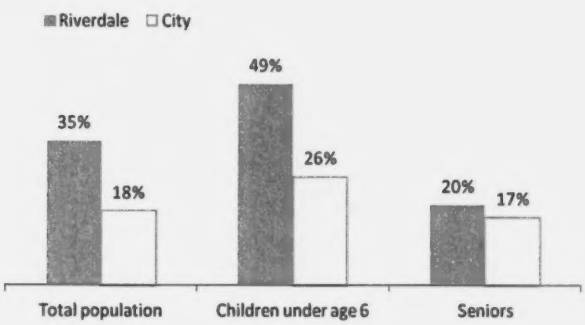
There are slightly more Riverdale residents who have an activity limitation as compared to the city (20% vs. 16%).

INCOME AND HOUSING

HOUSING AND MOBILITY



POVERTY RATES



KEY FINDINGS

Over three quarters (83%) of Riverdale residents are renters, compared to just under one third of the city's overall general population (32%).

The vast majority of Riverdale residents (84%) live in apartment buildings with 5 or more storeys.

There is a smaller proportion of households living in unaffordable housing in Riverdale compared to the city.

Over half the rate of residents (57%) in Riverdale changed address in the year before the census which is more often than the average for the city (37%). Due to the high rates of immigrants settling in this neighbourhood, many of these residents would have changed countries, not just addresses.

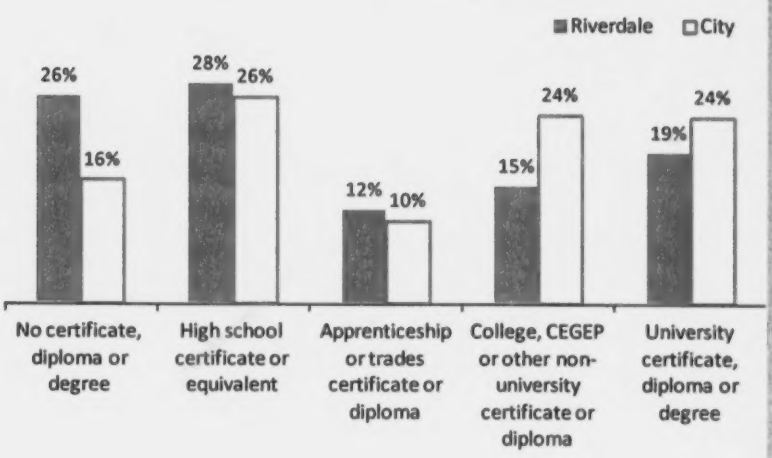
Over a third of Riverdale's population (35%) is living in poverty compared to the city (18%).

Almost one in two (49%) children under six in Riverdale are living on incomes below the poverty line.

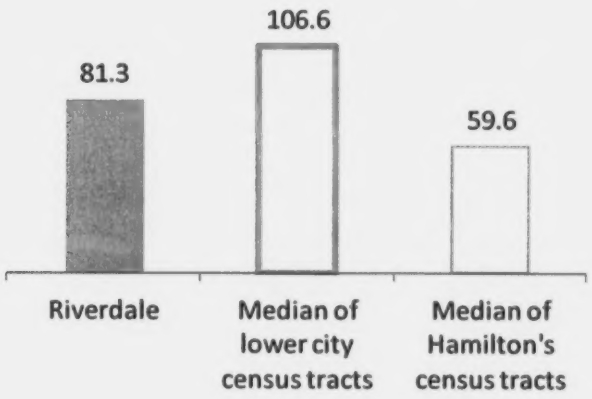
The poverty rate of Riverdale seniors is higher than the city (20% vs. 17%).

EDUCATION

HIGHEST EDUCATION COMPLETED, PERSONS AGED 25-64



HIGH SCHOOL NON-COMPLETION RATE PER 1,000 STUDENTS



KEY FINDINGS

One in four Riverdale residents (26%) does not have a certificate, diploma or degree, almost two thirds the rate for the city as a whole (16%).

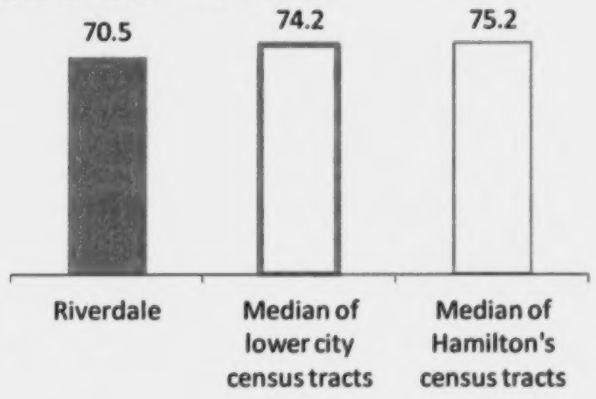
Over one quarter (28%) of the population has a high school certificate or equivalent, which is virtually equal to the city as a whole (26%).

19% of Riverdale residents have a university education, compared to the city's rate of 24%. This is tied for the highest rate of university education among the neighbourhoods profiled in this report, and is due in part to high rates of education among recent immigrants.

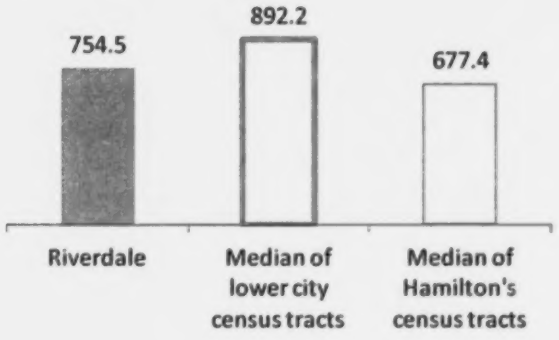
The high school dropout rate in Riverdale is lower than in the lower city, but higher than the average for the city as a whole.

HEALTH

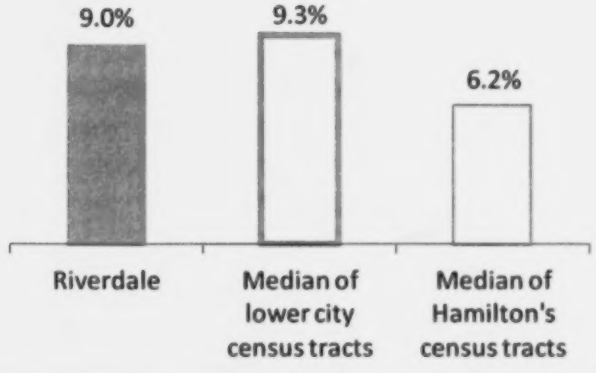
AVERAGE AGE OF DEATH



EMERGENCY ROOM VISITS PER 1000 RESIDENTS PER YEAR



PERCENTAGE OF ER VISITORS REPORTING NO FAMILY DOCTOR



KEY FINDINGS

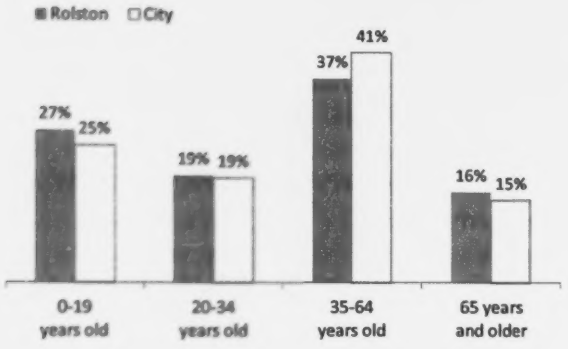
The average age of death in Riverdale is 70.5 years old, which is 4.7 years younger than the city and 3.7 years younger than the lower city.

The rate of emergency room visits is higher in Riverdale than in Hamilton but slightly lower than the lower city. There are almost 80 additional visits to the emergency room for every 1,000 Riverdale residents per year than the city as a whole. There are also nearly 140 fewer visits to the emergency room per 1,000 than the lower city.

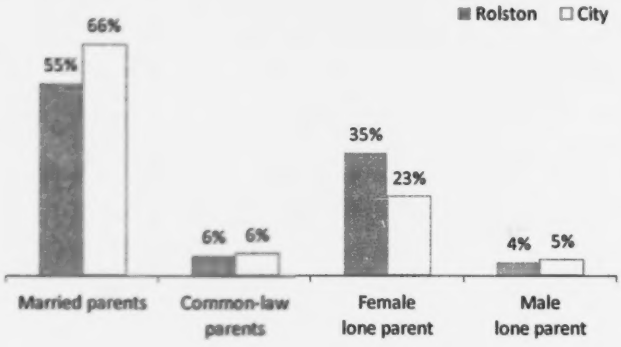
There is a near equal proportion of Riverdale residents who visit an emergency room and do not have a family doctor, compared to the lower city (9.0% vs. 9.3%), but these rates are higher than the city as a whole (6.2%).

POPULATION CHARACTERISTICS

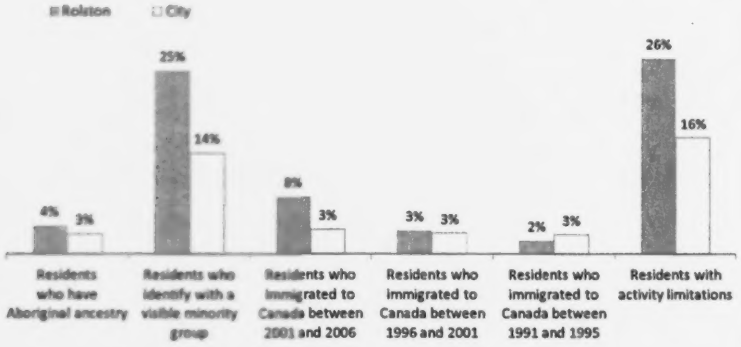
AGE GROUPS



FAMILIES WITH CHILDREN UNDER 18



POPULATION GROUPS



KEY FINDINGS

The distributions of age groups in Rolston is similar to those of the city as a whole. However there are both slightly higher proportions of children and seniors in Rolston than in the city.

Over half of the families with children in Rolston are led by married parents, but a lower rate than the for the city (55% vs. 66%).

Over one third of the families with children in Rolston are led by female lone parents (35%), compared to less than a quarter of families in the city overall.

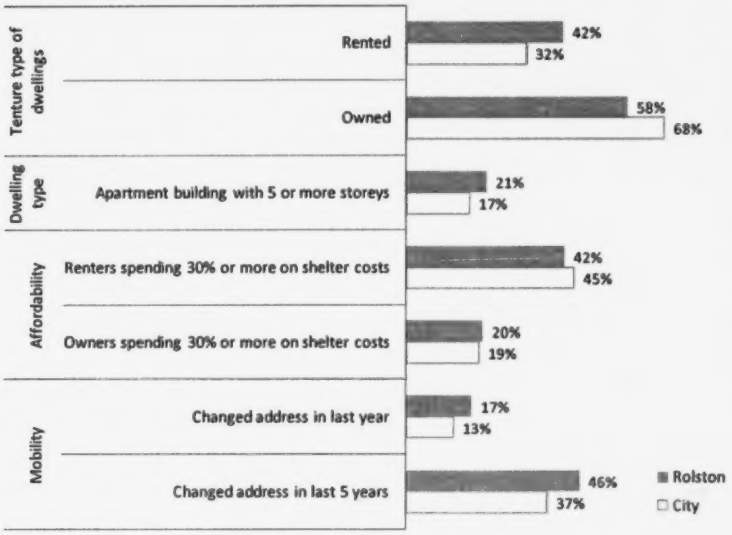
Rolston has almost double the rate of residents who identify with a visible minority group as the city overall (25% vs. 14%).

There are over twice as many residents who immigrated between 2001 and 2006 in Rolston than in Hamilton (8% vs. 3%).

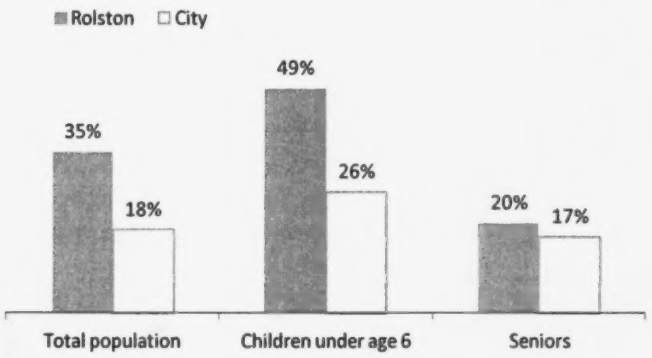
There is a larger proportion of persons with activity limitations in Rolston than in the city (26% vs. 16%).

INCOME AND HOUSING

HOUSING AND MOBILITY



POVERTY RATES



KEY FINDINGS

There is a smaller proportion of renters and a larger proportion of owners in Rolston than in the city overall.

Close to half the proportion of renters (42%) live in unaffordable housing, spending 30% or more of their income on shelter costs. This rate is slightly better than the rate for the city (45%).

Compared to the city overall, a higher rate of Rolston residents changed address in last 5 years.

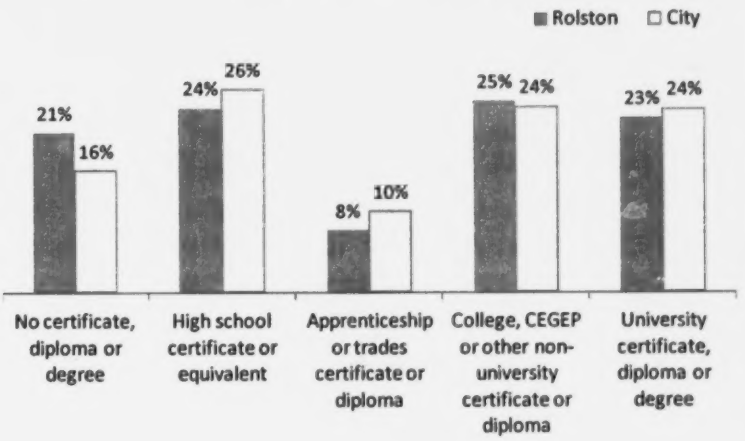
35% of residents in Rolston live on incomes below the poverty line, higher than the rate for the city (18%).

Almost half (49%) of children under 6 in Rolston are living in poverty.

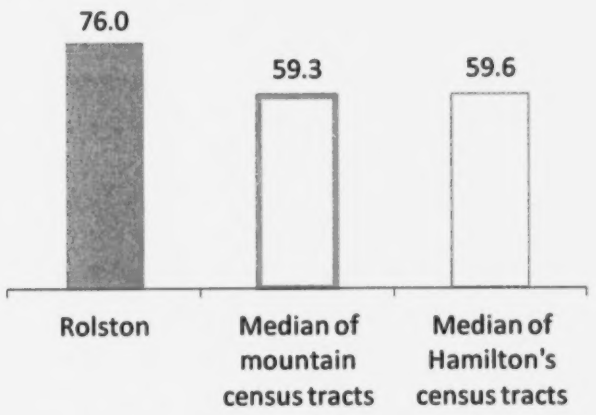
The proportion of poverty among seniors living in Rolston is higher than the city's rate (20% vs. 17%).

EDUCATION

HIGHEST EDUCATION COMPLETED, PERSONS AGED 25-64



HIGH SCHOOL NON-COMPLETION RATE PER 1,000 STUDENTS



KEY FINDINGS

One in five Rolston residents (21%) do not have a certificate, diploma or degree, which is higher than the rate for the city as a whole (16%).

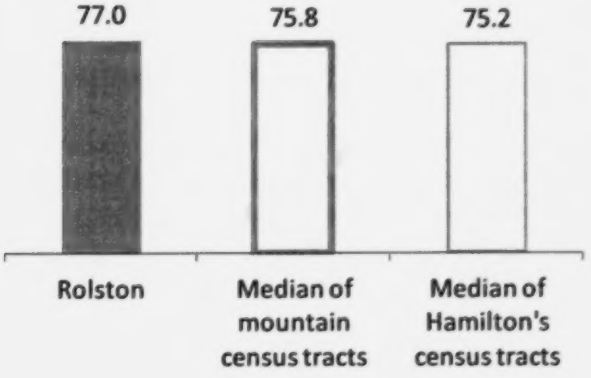
One quarter of the population (24%) have a high school certificate or equivalent, which is similar to the city's rate (26%).

The proportion of residents with university degree is almost equal as to the city (23% vs. 24%).

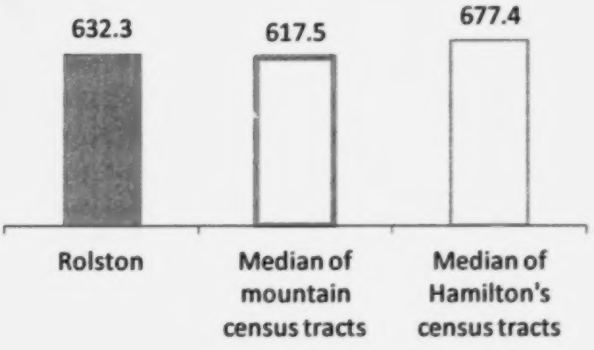
The proportion of Rolston's students who don't complete high school is higher than the rates for the city and the mountain.

HEALTH

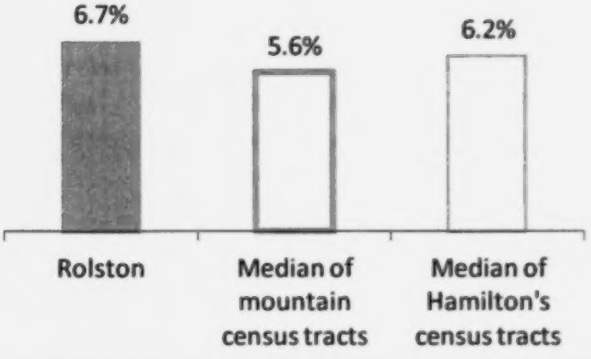
AVERAGE AGE OF DEATH



EMERGENCY ROOM VISITS PER 1,000 RESIDENTS PER YEAR



PERCENTAGE OF ER VISITORS REPORTING NO FAMILY DOCTOR



KEY FINDINGS

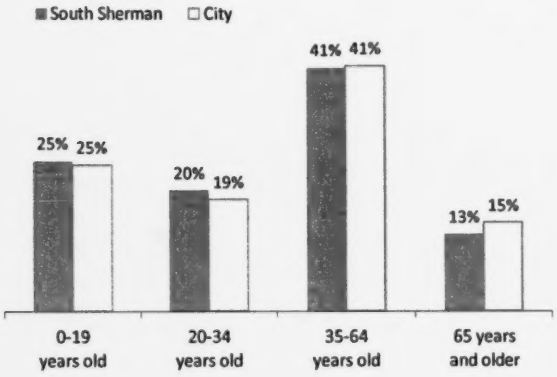
The average age of death in Rolston is 77 years old, which is 1.8 years older than the median for the city and 1.2 years older than the median for mountain neighbourhoods.

The rate of emergency room visits is lower in Rolston than in the city, but slightly higher than for the mountain. On average, there are almost 45 fewer visits to the emergency room for every 1,000 Rolston residents per year than the city.

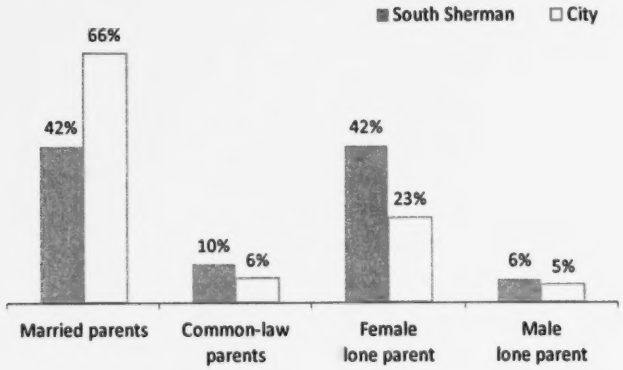
Compared to the city and the mountain, more Rolston residents who have visited the emergency room do not have a family doctor.

POPULATION CHARACTERISTICS

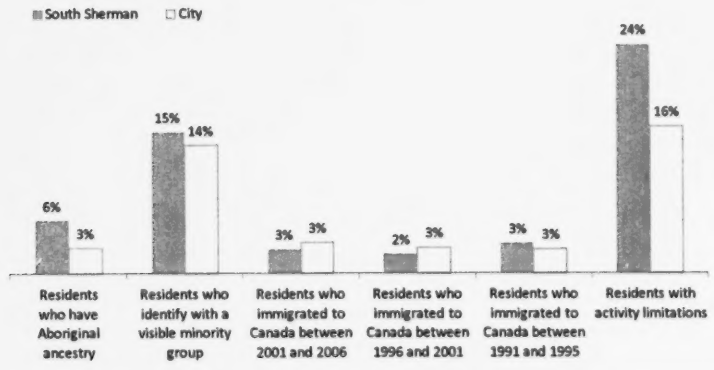
AGE GROUPS



FAMILIES WITH CHILDREN UNDER 18



POPULATION GROUPS


South Sherman
City
6% 3%
15% 14%
3% 3%
2% 3%
3% 3%
24% 16%
Residents who have Aboriginal ancestry
Residents who identify with a visible minority group
Residents who immigrated to Canada between 2001 and 2006
Residents who immigrated to Canada between 1996 and 2001
Residents who immigrated to Canada between 1991 and 1995
Residents with activity limitations

KEY FINDINGS

The distribution of age groups in South Sherman is similar to the city as a whole.

There are slightly more young adults and slightly fewer seniors per capita in South Sherman than in Hamilton.

There are equal proportions of families with children led by married parents as are led by female lone parents neighbourhood (42%).

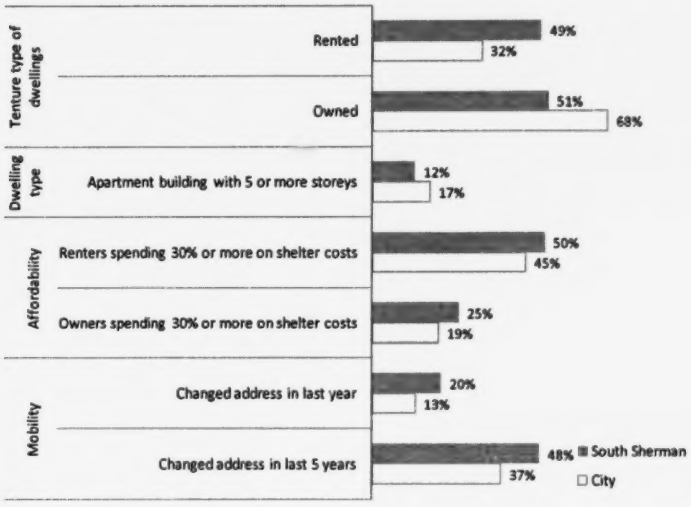
The proportion of residents with Aboriginal ancestry is double the city's rate (6% vs. 3%).

The proportions of residents identify with a visible minority group and immigrants in South Sherman are very similar to the city.

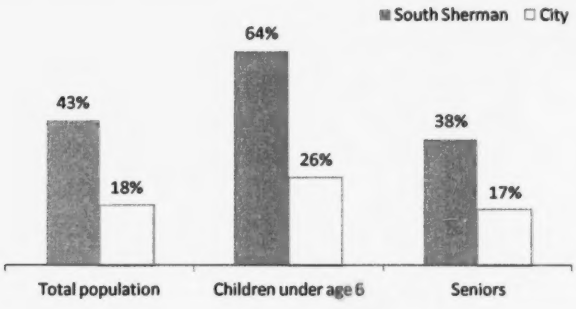
There is a larger proportion of persons with activity limitations in South Sherman than in the city (24% vs. 16%).

INCOME AND HOUSING

HOUSING AND MOBILITY



POVERTY RATES



KEY FINDINGS

The majority of South Sherman residents are homeowners (51%), but a smaller proportion than the city (68%).

Almost half of South Sherman residents are renters (49%).

Half of renters in South Sherman live in unaffordable housing and spend 30% or more of their income on shelter costs.

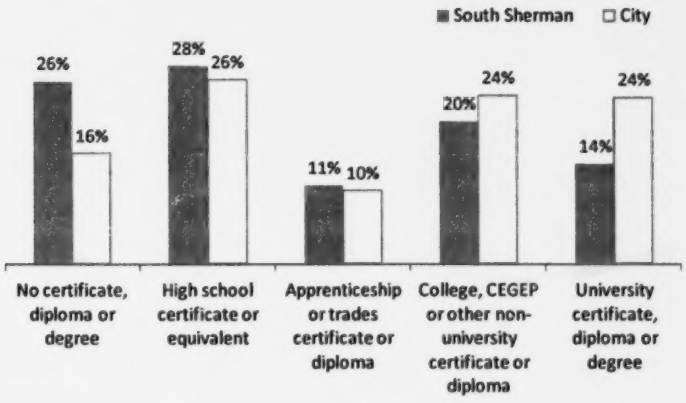
One in four homeowners live in unaffordable housing and spend 30% or more of their income on shelter costs

South Sherman residents are more mobile than the average for the city, as residents are more likely to move both in a one year or five year period.

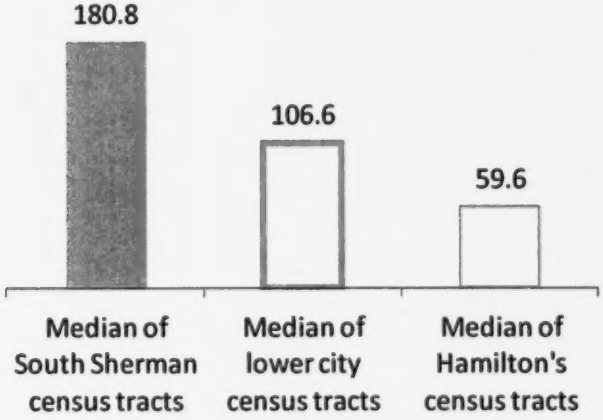
Poverty rates in South Sherman are more than double the rates for the city. More than six in ten children under age 6 and almost one in four seniors in South Sherman live on incomes below the poverty line.

EDUCATION

HIGHEST EDUCATION COMPLETED, PERSONS AGED 25-64



HIGH SCHOOL NON-COMPLETION RATE PER 1,000 STUDENTS



KEY FINDINGS

More than one in four South Sherman residents (26%) do not have a certificate, diploma or degree, which is higher than for the city as a whole (16%).

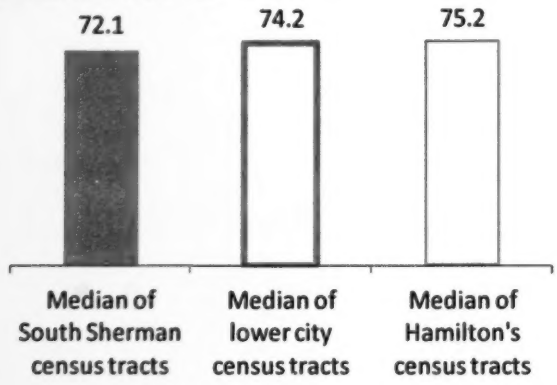
Over one quarter of the population (28%) has a high school certificate or equivalent, virtually the same rate as the city (26%).

There are fewer residents with university education (14%) compared to the city's residents (24%).

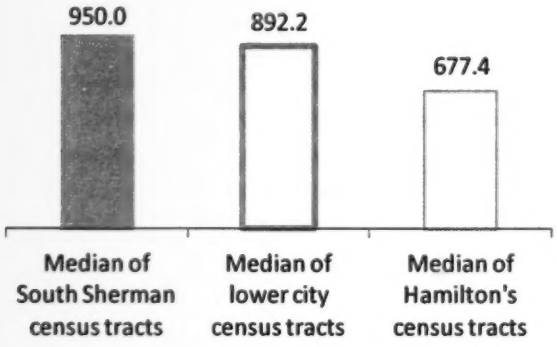
There is three times the proportion of students who don't complete high school in South Sherman compared to the city as a whole.

HEALTH

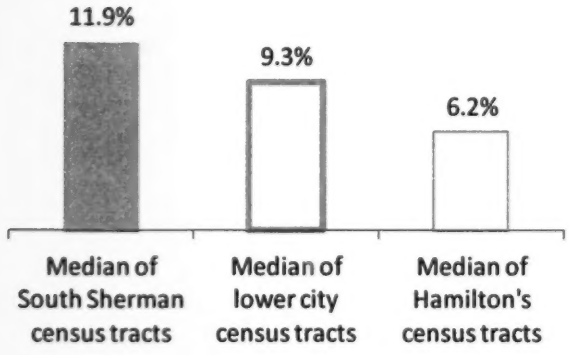
AVERAGE AGE OF DEATH



EMERGENCY ROOM VISITS PER 1,000 RESIDENTS PER YEAR



PERCENTAGE OF ER VISITORS REPORTING NO FAMILY DOCTOR



KEY FINDINGS

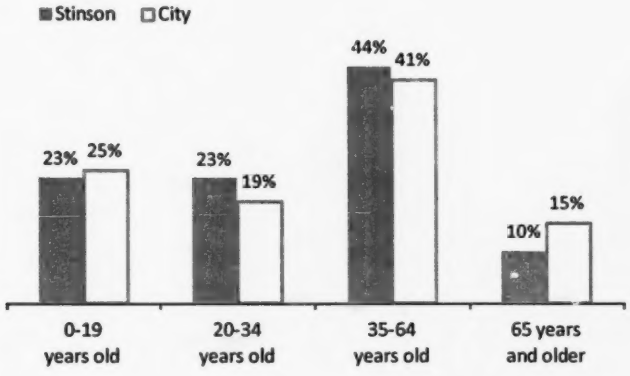
The average age of death in South Sherman is 72.1 years, which is 3.1 years younger than for the city overall and 2.1 years younger than for the lower city.

The rate of emergency room visits is slightly higher in South Sherman than in Hamilton. On average, there are 237 additional visits to the emergency room for every 1,000 residents per year in South Sherman than the city as a whole, and 58 fewer visits per 1,000 people than the lower city.

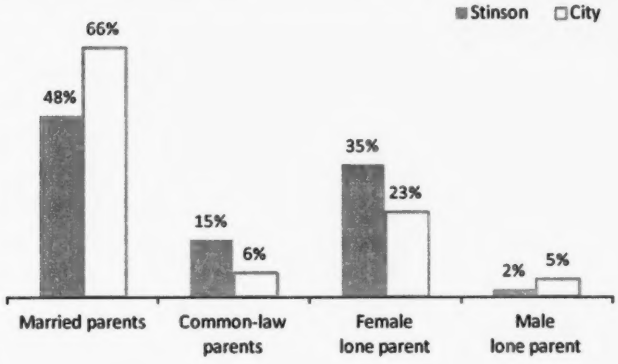
Compared to the lower city and Hamilton, more South Sherman residents who have visited the emergency room do not have a family doctor.

POPULATION CHARACTERISTICS

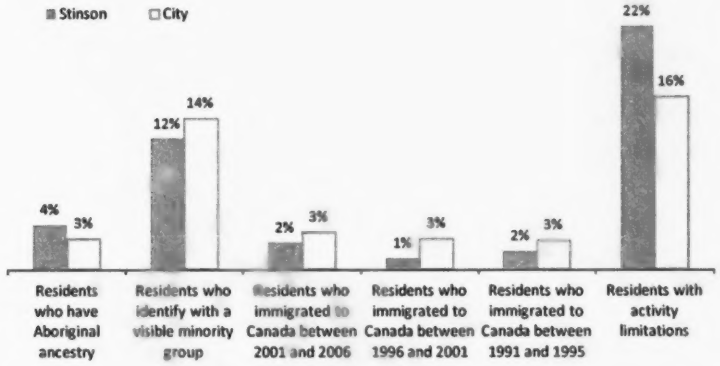
AGE GROUPS



FAMILIES WITH CHILDREN UNDER 18



POPULATION GROUPS



KEY FINDINGS

There are higher rates of both young and middle-aged adults Stinson than in the city. Ten percent of Stinson residents are seniors compared to 15% of the city's residents.

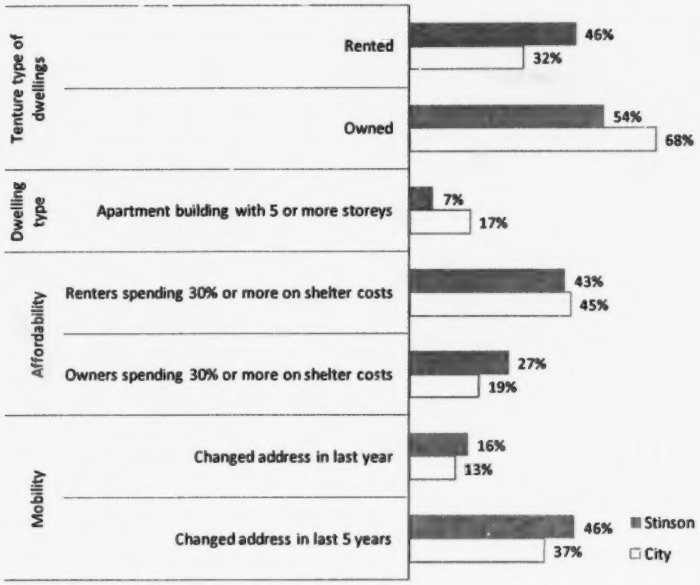
37% of Stinson families with children under 18 are headed by lone parents compared to 28% for the city as a whole.

Stinson has a slightly higher rate of residents with Aboriginal ancestry but lower rates of residents identifying with visible minorities groups or who have recently immigrated to Canada.

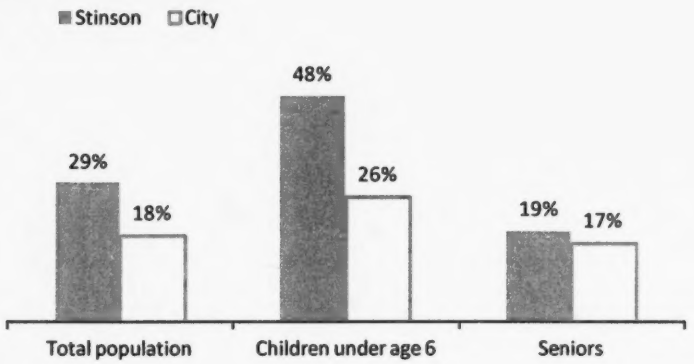
There is a higher proportion of persons of activity limitations in Stinson than the city (22% vs. 16%).

INCOME AND HOUSING

HOUSING AND MOBILITY



POVERTY RATES



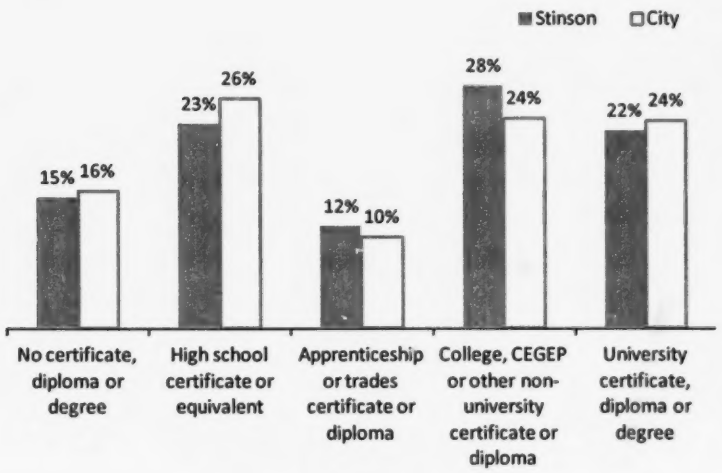
KEY FINDINGS

There are almost equal proportions of owners and renters in Stinson. There is a slightly lower proportion of renters living in unaffordable housing (spending more than 30% of their income on shelter costs) than in the city. On the other hand, there is a higher proportion of owners living in unaffordable housing instance than in the city.

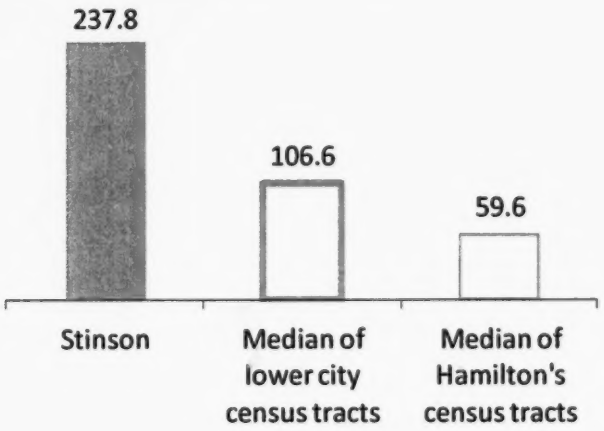
Almost 3 in 10 Stinson residents are living on incomes below the poverty line compared to a bit less then two in 10 for the city overall. Almost half of Stinson's young children are living in poverty.

EDUCATION

HIGHEST EDUCATION COMPLETED, PERSONS AGED 25-64



HIGH SCHOOL NON-COMPLETION RATE PER 1,000 STUDENTS



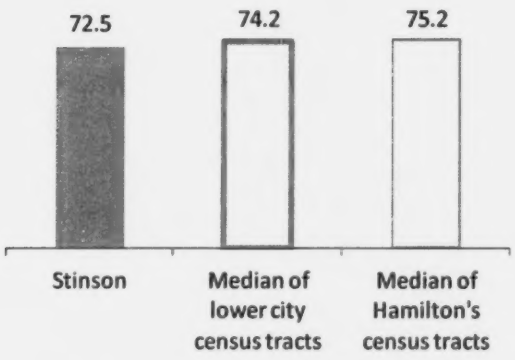
KEY FINDINGS

The rates of the highest education completed in Stinson are very similar to the city. Half of Stinson residents have college or university diploma. 38% of Stinson residents have high school or less education, and 12% have an apprenticeship or trade diploma.

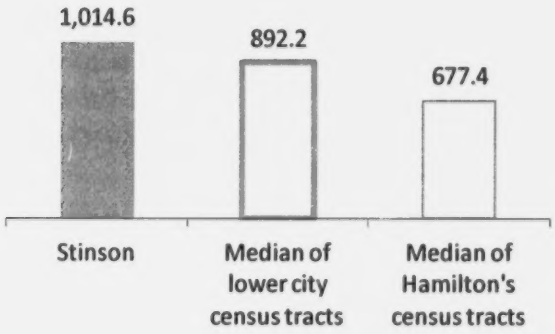
Currently, however, almost 24% of Stinson students are not completing high school.

HEALTH

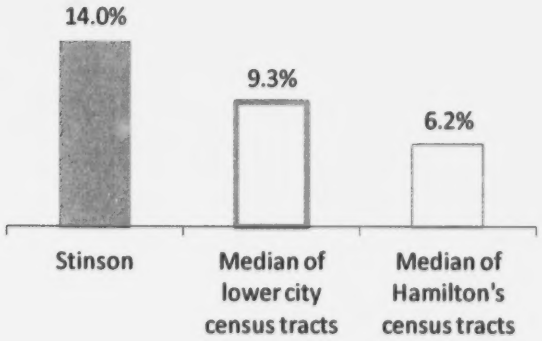
AVERAGE AGE OF DEATH



EMERGENCY ROOM VISITS PER 1,000 RESIDENTS PER YEAR



PERCENTAGE OF ER VISITORS REPORTING NO FAMILY DOCTOR



KEY FINDINGS

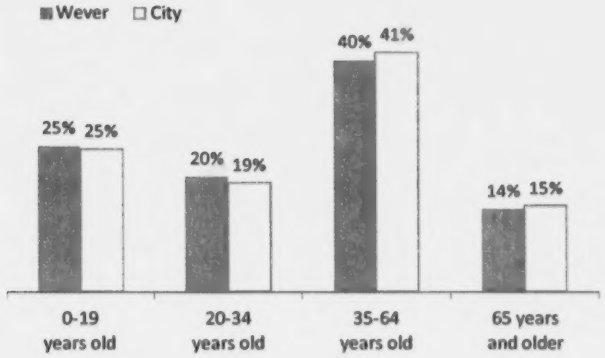
The average age of death in Stinson is is 72.5 years old, which is 2.7 years younger than the city and 1.7 years younger than the lower city.

The rate of emergency room visits is higher in Stinson than in Hamilton. On average, there more than 300 additional visits to the emergency room for every 1,000 Stinson residents per year than the city as a whole.

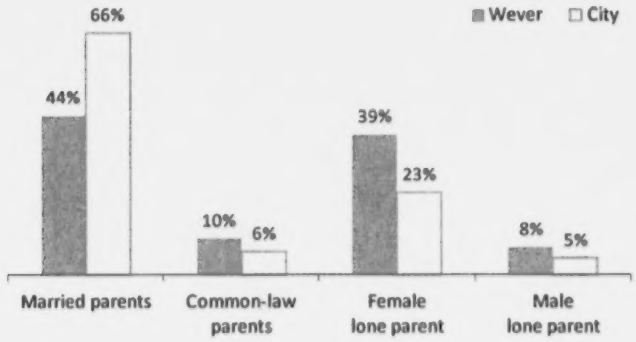
Compared to Hamilton's overall population, more than double the proportion of Stinson residents who visit an emergency room do not have a regular doctor (6.2% vs. 14.0%).

POPULATION CHARACTERISTICS

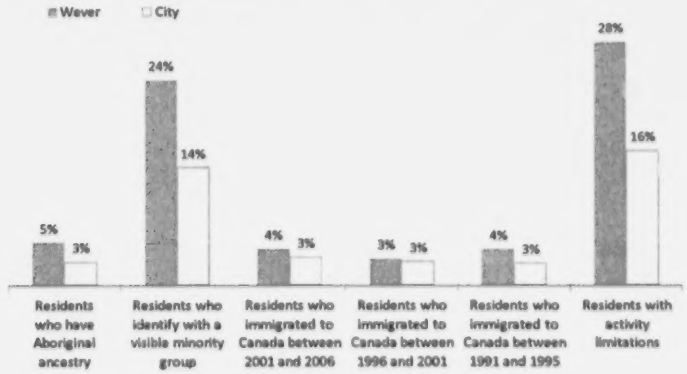
AGE GROUPS



FAMILIES WITH CHILDREN UNDER 18



POPULATION GROUPS



KEY FINDINGS

The age distribution in Wever is almost identical to the age distribution in the city overall.

Almost four in ten (39%) Wever families with children are led by female lone parents (compared to 23% for the city overall).

There is a higher proportion of male lone parents (8%) living in the Wever than the city as a whole (5%).

There is a higher proportion of residents in Wever with Aboriginal ancestry compared to the city (5% vs. 3%).

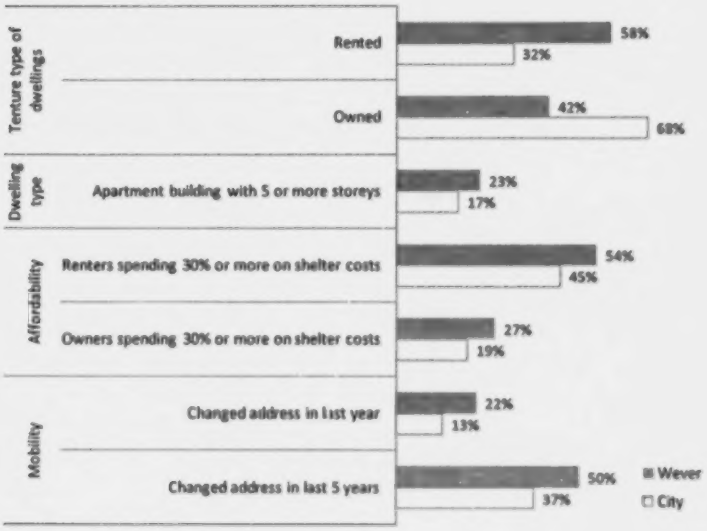
A greater proportion of Wever residents (24%) identify with a visible minority group than in the city (14%).

The proportion of residents in Wever who immigrated to Canada in the most recent decades is slightly higher than in the city as a whole.

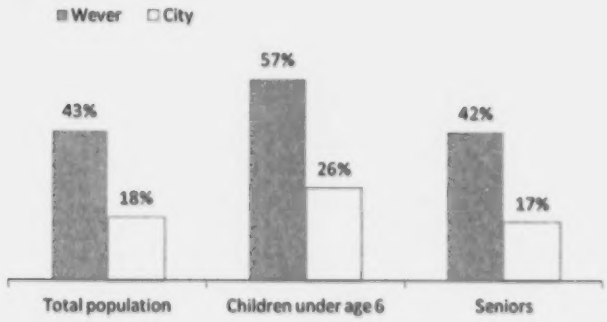
There is a larger proportion of persons with activity limitations in Wever than in the city (24% vs. 16%).

INCOME AND HOUSING

HOUSING AND MOBILITY



POVERTY RATES



KEY FINDINGS

There are more renters (58%) than homeowners (42%) in Wever.

Almost a quarter of Wever residents (23%) are living in apartment buildings with five or more storeys.

More than half the proportion of renters in Wever (54%) live in unaffordable housing and spend 30% or more on shelter costs.

Close to one third of homeowners (27%) also live in unaffordable housing and spend 30% or more on shelter costs.

Almost one quarter (22%) of Wever residents move each year, compared to 13% average for the city.

The poverty rates in Wever are more than double the city average in all groups examined.

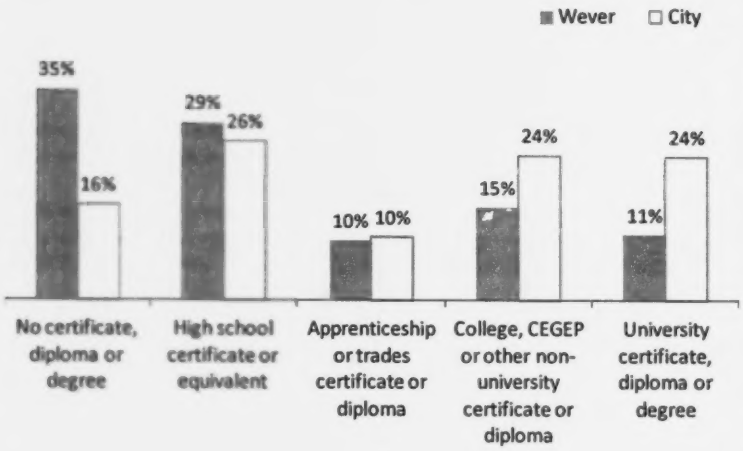
More than four in ten Wever residents (43%) are living in poverty, compared to 18% for the city.

More than half of children under age six in Wever are living in poverty (57%) .

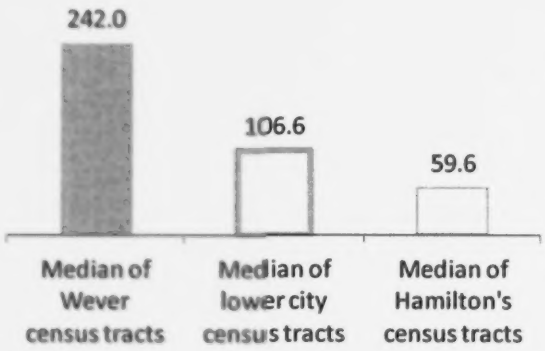
More than four in ten Wever seniors (42%) are living in poverty.

EDUCATION

HIGHEST EDUCATION COMPLETED, PERSONS AGED 25-64



HIGH SCHOOL NON-COMPLETION RATE PER 1,000 STUDENTS



KEY FINDINGS

More than one third of Wever residents (35%) aged 25-64 do not have a certificate, diploma or degree, almost double the rate for the city as a whole (16%).

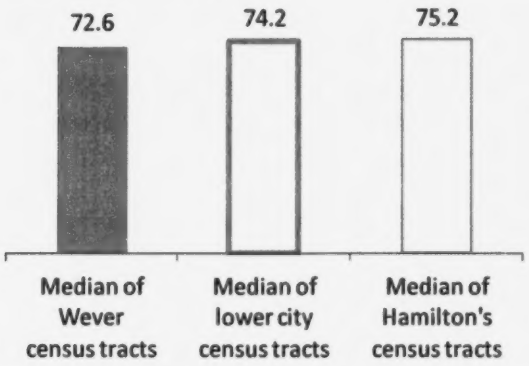
29% of Wever residents in this age group have a high school certificate or equivalent, slightly higher than the city as a whole (26%).

A smaller group of Wever residents (11%) have a university education compared to the city (24%).

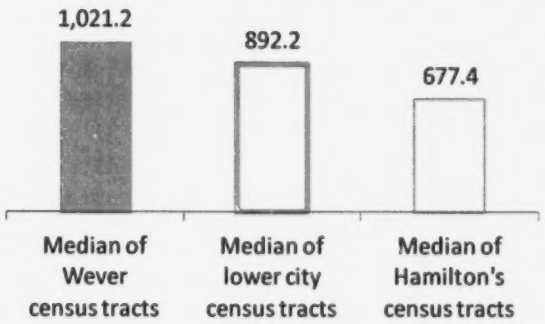
In Wever, students are more than four as likely not to complete high school as compared to the rate for the median of the city's neighbourhoods. Wever's high school non-completion rate is also twice as high as compared to the median rate for the lower city's neighbourhoods.

HEALTH

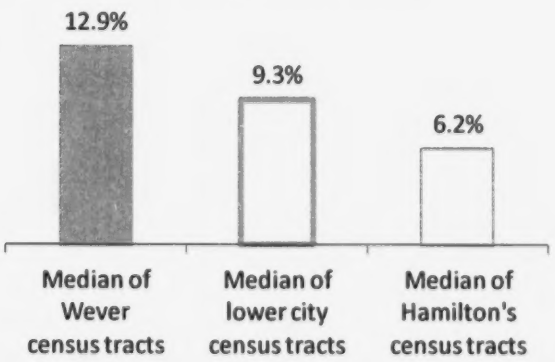
AVERAGE AGE OF DEATH



EMERGENCY ROOM VISITS PER 1,000 RESIDENTS PER YEAR



PERCENTAGE OF ER VISITORS REPORTING NO FAMILY DOCTOR



KEY FINDINGS

The average age of death in Wever is 72.6 years old, which is 2.6 years younger than the city and 1.6 years younger than the lower city.

The rate of emergency room visits is higher in Wever than in Hamilton. On average, there almost 350 additional visits to the emergency room for every 1,000 Wever residents per year than the city as a whole.

Compared to Hamilton's overall population, double the proportion of Wever residents who visit an emergency room do not have a regular doctor (6.2% vs. 12.9%).